31858

IREDELL COUNTY HEALTH DEPARTMENT

11842

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR LEON BARKER DATE 8/21/90 PERMIT NO. 12H-1-A4344

PHONE: Business _____ Home _____

LOCATION 4621 N PAST MT. MISTHAL RD ON (R) BESIDE LOG CABIN SERVICE STATION

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

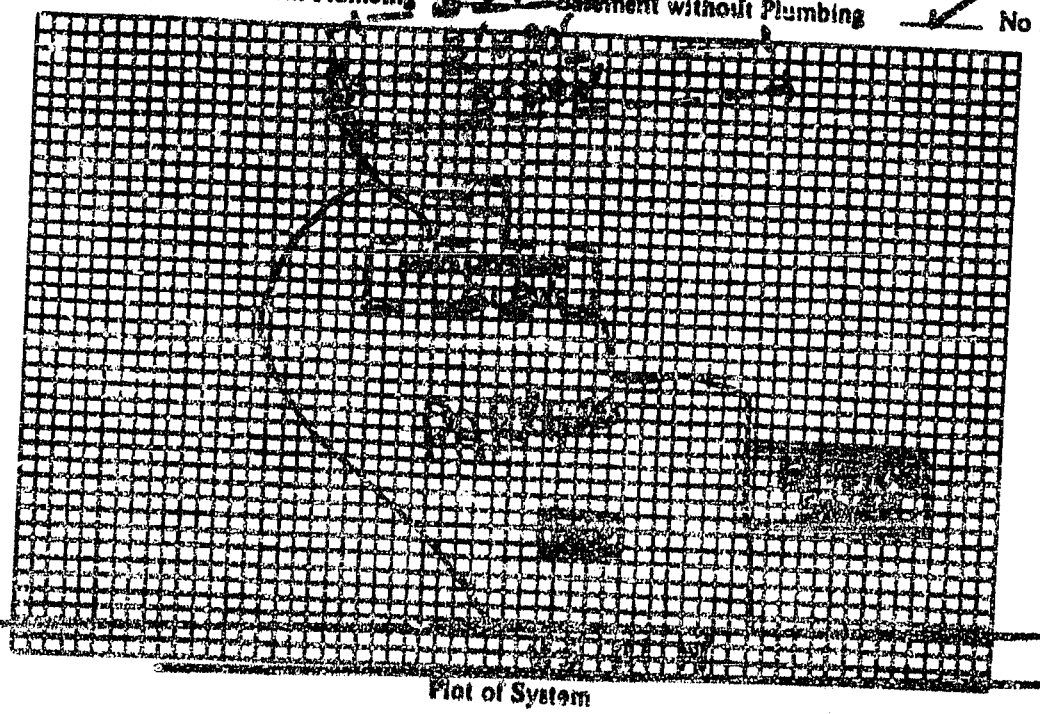
House ( ) Mobile Home ( ) Business (✓) Other SHOP & RETAIL STORE 3200 SQ FT 380 GAL/DAY

No. Bedrooms N/A No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No ( )
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes (✓) No ( )
Lot Area AMPLE REPAIR

Character & Porosity of Soil CLAY LOAM
Percolation Rate 5
Topography 2-6%
Depth to Water Table 10'+
Rock or other impervious formations NONE

_____ Basement with Plumbing 3'-5'90' Basement without Plumbing _____ No Basement



Plat of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. BID Linear Ft. 270
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Ray Inspector

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Hassell / Coleman Tank, Inc DATE 8/21/90

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold