41569

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

13549

OWNER OR CONTRACTOR PAUL W. KENNEDY DATE 11/8/91 PERMIT NO. 12K-A-12A

PHONE: Business _____ Home _____

LOCATION US 21 N, TR NC 901 E, TL GUILFORD ROAD, TL FOX HUNTER ROAD, 1ST DRIVE ON (L) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

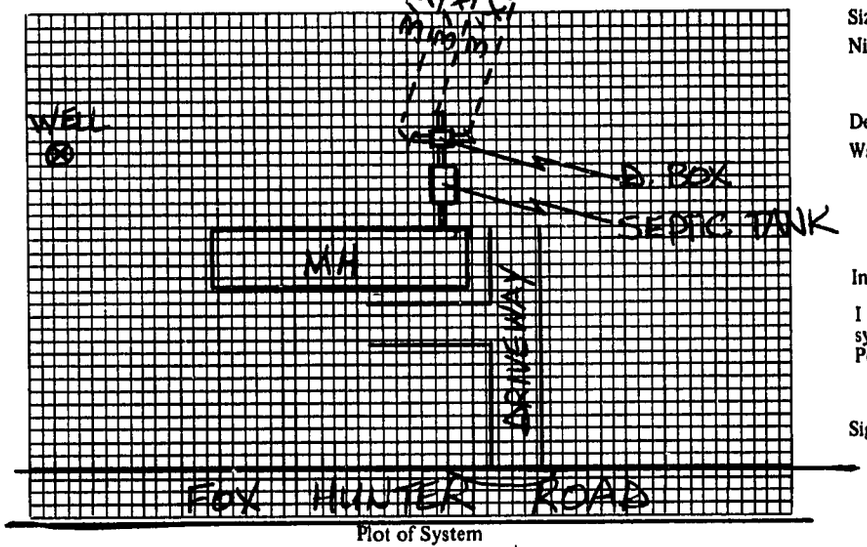
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2	No. Bathrooms 2	Character & Porosity of Soil	PS
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	.35 GPD / FT2
Auto. Dishwasher	Yes (✓) No ( )	Topography	2-4%, LS
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	>4'
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	NONE

Lot Area 9.078 AC

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

ACP/9/24/91



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual (✓) WELL
Public ( )

Installed by WAYNE POTTS

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 11/8/91

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