IREDELL COUNTY HEALTH DEPARTMENT

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

OWNER OR CONTRACTOR KATHY GANDY DATE 12-3-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 115 N - T.L. on Linney's Mill Rd. - T.R. on Oak Harbor Rd - 1st dirt road past Chicken House on L - go ½ mi. on L S. R. No. _____

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

DOUBLEWIDE

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

No. Bedrooms 3 No. Bathrooms 2 Character & Porosity of Soil Clayey

Sewage Disposal Unit Yes ( ) No (✓) Percolation Rate 4 gal/sq ft 8

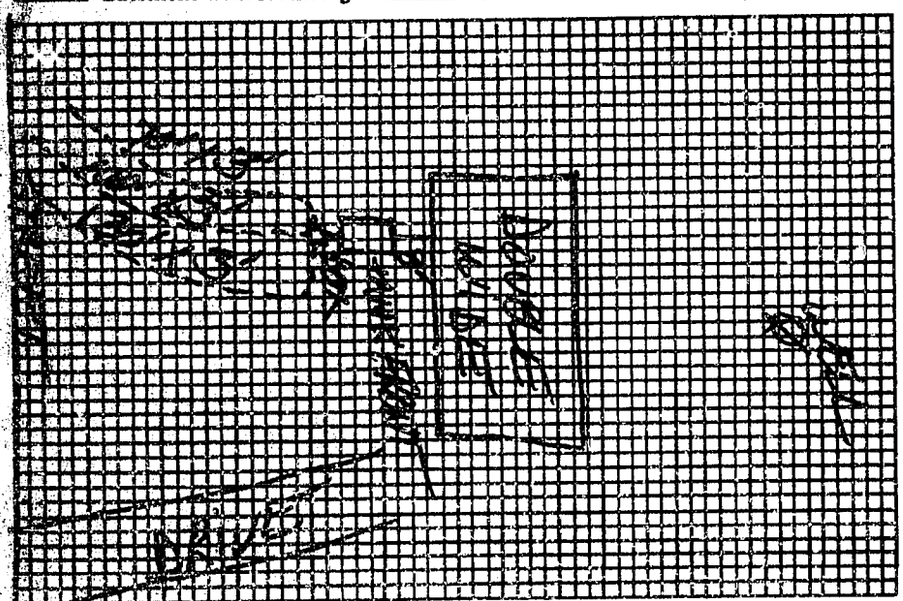
Auto. Dishwasher Yes (✓) No ( ) Topography Level

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 4'+

Site Suitable Yes (✓) No ( ) Rock or other impervious formations none observed.

Lot Area 1.2 acres.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 3

No. of Lines

Sq. Ft. 700 Lineal Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by James Hartness

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sheets, R.S.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 12-3-87

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