38720

IREDELL COUNTY HEALTH DEPARTMENT

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

11923

OWNER OR CONTRACTOR KAREN SHUCK / CNH REALTY DATE 6/6/91 PERMIT NO. 15A-A40

PHONE: Business 592-2111 Home

LOCATION NC 115 N, TR FRIENDSHIP CH. RD, ~1 MI, 1ST HOUSE ON (R) PAST SANDY RIDGE CHURCH S. R. No.

SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

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

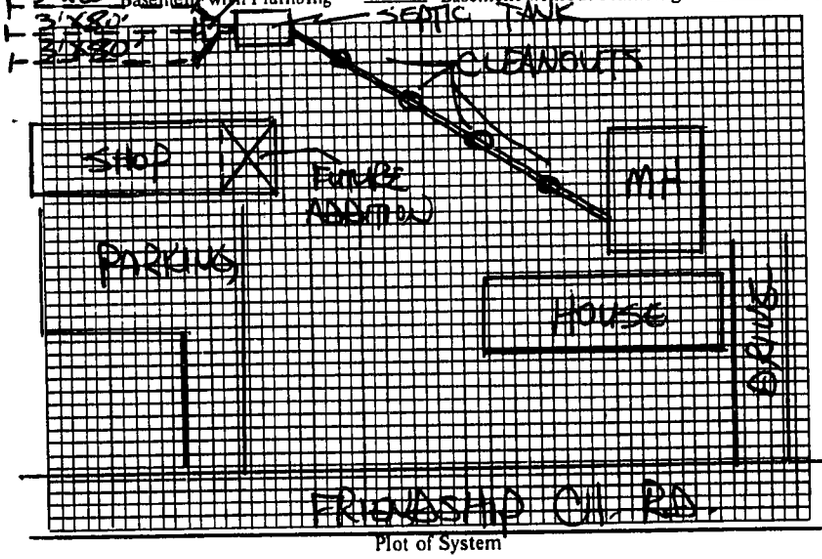
No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes (✓)	No ( )	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Character & Porosity of Soil PS
Percolation Rate .4 GPD/FT²
Topography 4-6%
Depth to Water Table >4'
Rock or other impervious formations NONE

Lot Area D.BOX

3'x60' Basement with Plumbing ___ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by

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

Signed:

IMPROVEMENTS PERMIT BY

COMMENTS: ① SYSTEM DESIGNED FOR SHOP ADDITION TO BE USED UNTIL THAT ADDITION IS CONSTRUCTED, AT WHICH TIME NEW SYSTEM WILL BE INSTALLED FOR MH.
② USE CLEANOUTS EVERY 50' BETWEEN MH AND SYSTEM

CERTIFICATE OF COMPLETION BY DATE

EXISTING SYSTEM CHECKED BY: STEVE HENDRICK DATE 6/6/91

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