0252-FT

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 CARL S. MITCHELL JR. DATE 10-12-88 PERMIT NO. 2B

PHONE: Business _____ Home _____

LOCATION Hwy 115 N - T.R. on Hwy. 90 1- approx. one mile on left S. R. No. _____

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

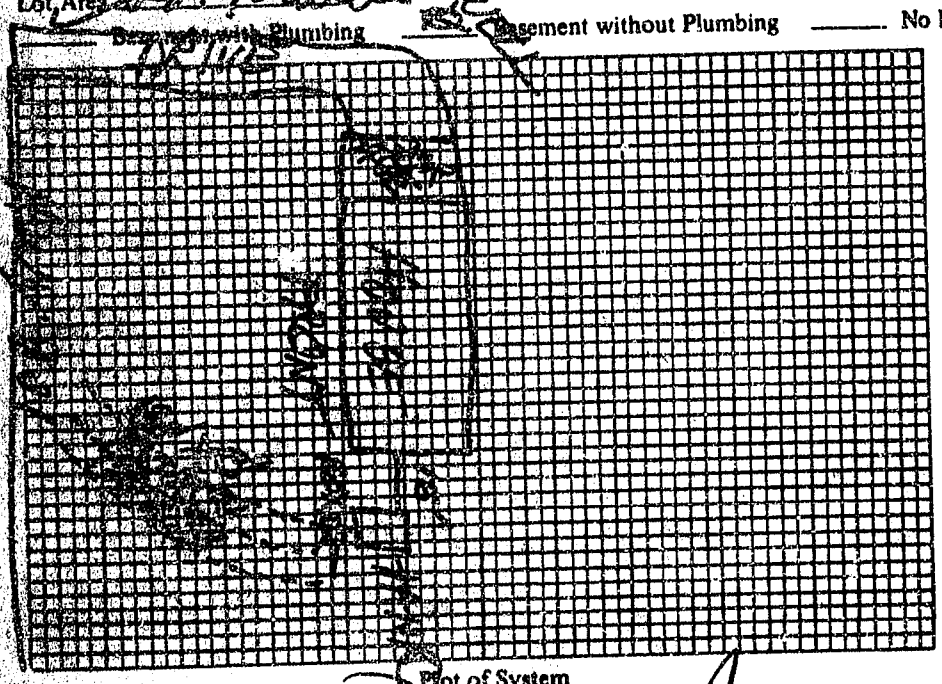
House (4) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (4)	
Auto. Dishwasher	Yes (4)	No ( )	
Auto. Wash. Machine	Yes (4)	No ( )	
Site Suitable	Yes (4)	No ( )	

Character & Porosity of Soil Loam Suitable.
Percolation Rate 5 min/1 inch.
Topography 2-10%
Depth to Water Table 12+
Rock or other impervious formations scattered rock.

Lot Area 24.92 acres



Plot of System

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1060 Linear Ft. 360
Depth of Stone in Lines 12"

Water Supply: Individual (4)
Public ( )

Installed by Dennis Gallihar

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Ford Jr.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Ford DATE 10-12-88

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