IREDELL COUNTY HEALTH DEPARTMENT

9748

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

OWNER OR CONTRACTOR Dale Williams DATE 9/28/87 PERMIT NO. B2

PHONE: Business _____ Home _____

LOCATION 7W/L 9W Myers Mill Rd on left to Right before Bridge

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

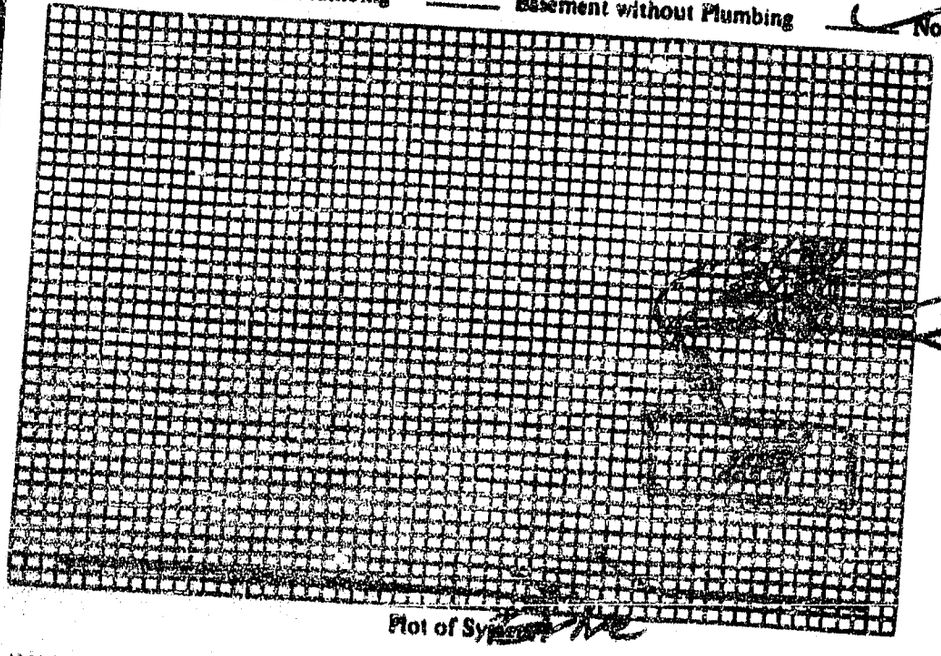
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 2AC

Character & Porosity of Soil Sandy Suitable
Percolation Rate 45"
Topography Slope
Depth to Water Table 48"
Rock or other impervious formations None

_____ 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 D L Beckham

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

Signed: _____

IMPROVEMENTS PERMIT BY D Mercer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D Mercer

EXISTING SYSTEM CHECKED BY: _____ DATE 9/28/87

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

DATE _____

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