04750

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 DEXTER HENDERSON DATE 6-3-86. PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 west to I77-T.R. on Warren's Bridge Rd. -T.L. on Butch Branch Rd. T.R. on Bushy Creek Rd. -T.L. on private drive just before white house on R. S.R. No. House at end of drive.

SUBDIVISION NAME _____ 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 2 Sacres

Character & Porosity of Soil Prov. Suitable.

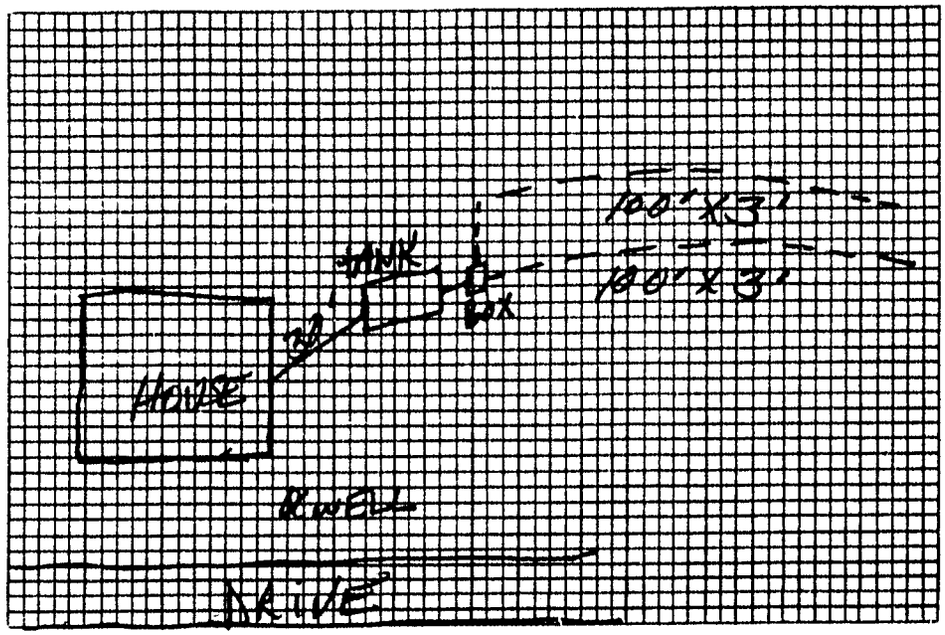
Percolation Rate 49 / Sq. ft.

Topography 2-6%

Depth to Water Table 10'+

Rock or other impervious formations scattered rock.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
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 Jerry L. Pierce

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 6-3-86.

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