05985

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 Edward A. Bissell DATE 3-17-87 PERMIT NO. _____

Nation Brand Mfg - Sam

PHONE: Business _____ Home _____

LOCATION I-77 N TL on 901 E TQ private drive past Handy Dumpster Garage S. R. No. _____

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

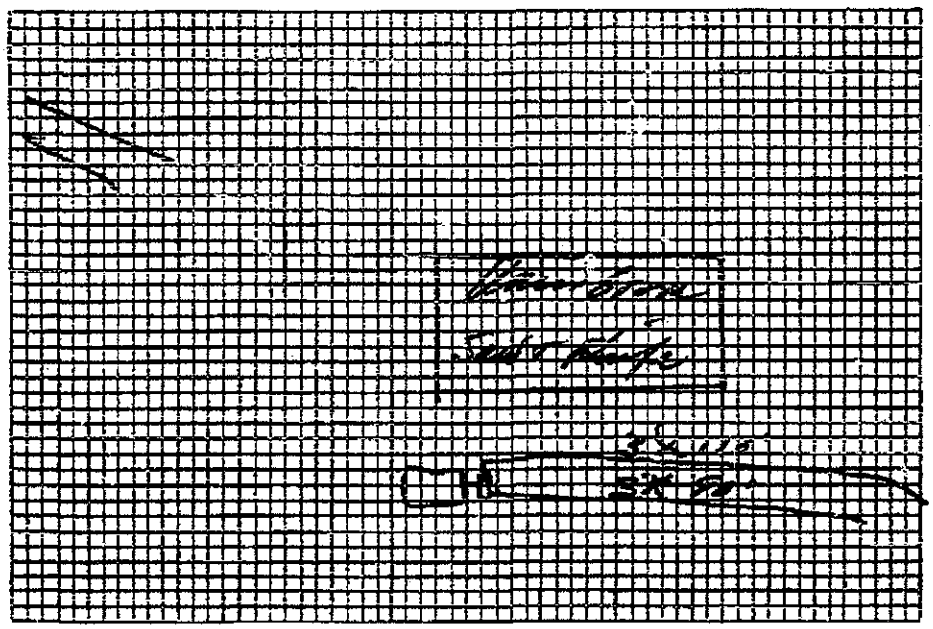
House ( ) Mobile Home ( ) Business (✓) Other _____

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Sandy Loam
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	1 Inch per min.
Auto. Wash. Machine	Yes ( )	No ( )	Topography	Gently Rolling
Site Suitable	Yes ( )	No ( )	Depth to Water Table	60"
			Rock or other impervious formations	Bedrock

Lot Area _____

_____ 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 24"

Water Supply: Individual ( )

Public (✓)

Installed by A-1 Backhoe

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

Signed: _____

3'x110'

3'x30'

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 3/17/87

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