IREDELL COUNTY HEALTH DEPARTMENT

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

14272

OWNER OR CONTRACTOR ERNEST H. RUNGE DATE 3/18/92 PERMIT NO. 12N-6-A-5

PHONE: Business _____ Home _____

LOCATION US 21N, TL TOMLIN ROAD, TL HICKORY GROVE ROAD, TR WINAMILL COURT, ON (R) JUST OVER HILL. S. R. No. _____

SUBDIVISION NAME DUTCHMAN CREEK ESTATES LOT NO. 5 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 125' x 343'

Character & Porosity of Soil PS
Percolation Rate .35 GPD / FT2
Topography 6-8% LS
Depth to Water Table >41
Rock or other impervious formations NONE

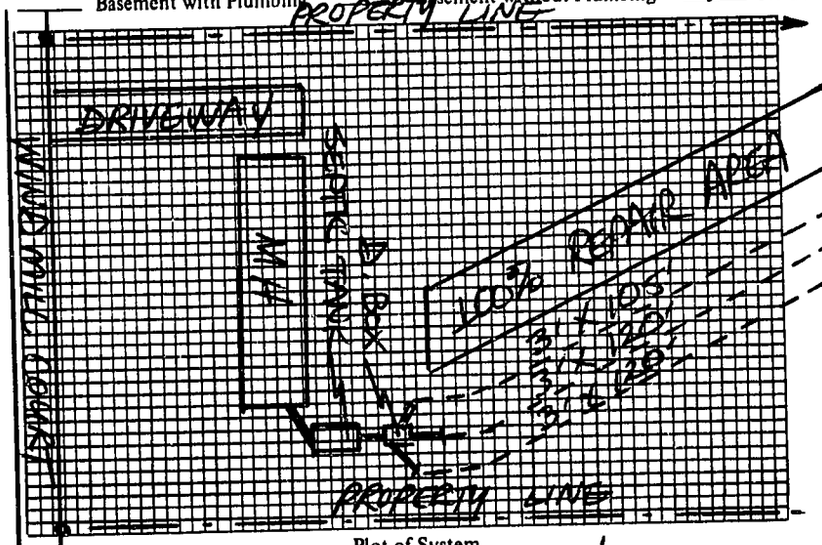
ACP 1-27-92

( ) Basement with Plumbing ( ) Basement without Plumbing (✓) No Basement

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)



Plot of System

Installed by A-1 BACKHOE

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEARICK

COMMENTS: ① MH NOT ON SITE AT TIME OF INSPECTION, KEEP MH MINIMUM 5' FROM SYSTEM.
② REPAIR AREA IS 100% CONVENTIONAL GRAVITY-FED WITH 0.35 APPLICATION RATE.

CERTIFICATE OF COMPLETION BY STEVE HEARICK DATE 3/18/92

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

HICKORY GROVE ROAD