IREDELL COUNTY HEALTH DEPARTMENT

9975

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

OWNER OR CONTRACTOR Dan Gelliher DATE 8 3 89 PERMIT NO.

PHONE: Business Home

LOCATION DIN L Gelliher (1938) 1st Log Cabin Go to End TR
Turn Right at End S. R. No.

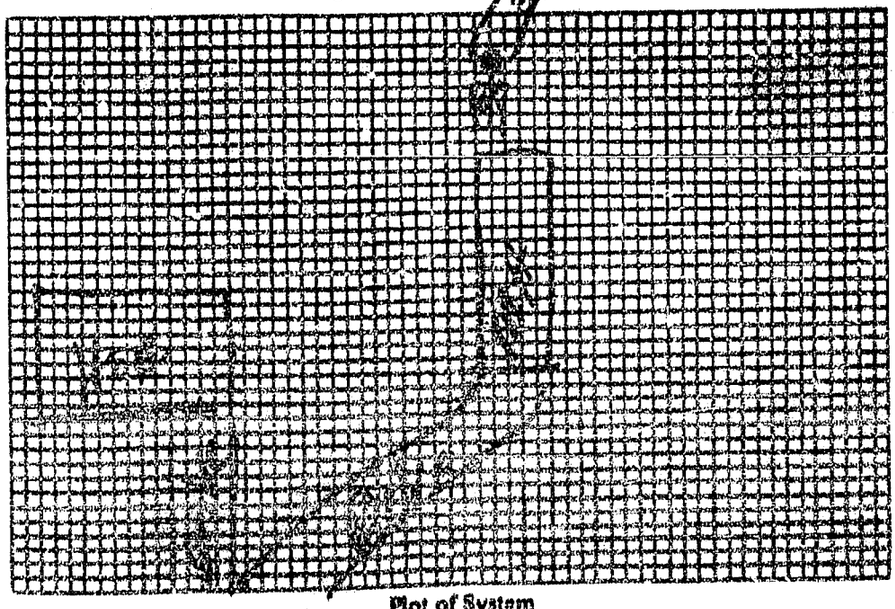
SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

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

No. Bedrooms 2 No. Bathrooms 1 Character & Porosity of Soil Gw Suitable
Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate
Auto. Dishwasher Yes ( ) No (✓) Topography Slight
Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 10 Ft
Site Suitable Yes (✓) No ( ) Rock or other impervious formations 100 Ft

Lot Area 1340

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 200 Linear Ft. 240
Depth of Stone in Lines 12
Water Supply: Individual (✓)
Public ( )

Installed by A1 Backhoe

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

Signed:

IMPROVEMENTS PERMIT BY D Weaver

COMMENTS:

CERTIFICATE OF COMPLETION BY D Weaver DATE 8 3 89

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