The proposed front deck addition does not appear to impact the existing septic system.
**NOTE:

R.S.
Date: 9-8-9
ICHD-Environmental Health Division

IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

14927
OWNER OR CONTRACTOR CALVIN Nicky MAYBERRY DATE 7/31/92 PERMIT NO. 12N-A-181

PHONE: Business Home

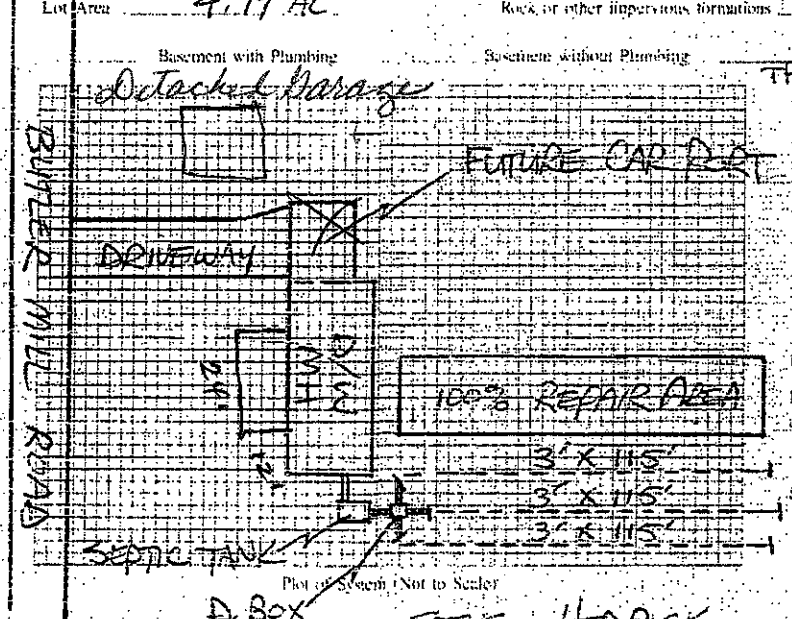
LOCATION US 21 N, TR TOMLINSON AVE, CONTINUE INTO BUTLER MILL ROAD, MH on (R) ~ 1/2 MILE EAST OF US 21 N S.R. No.

SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

House: Mobile Home ✓ Business Other

No. Bedrooms 3	No. Bathrooms 2	Soil Characteristics	PS
Garbage Disposal Unit	Yes No ✓	Application Rate	0.35 GPD/FT²
Auto. Dishwasher	Yes ✓ No	Topography	2-4% LINEAR SLOPE
Auto. Wash. Machine	Yes ✓ No	Depth to Water Table	24"
Lot Area 4.79 AC		Rock, or other impervious formations	NONE

Basement with Plumbing Basement without Plumbing No Basement ✓ Crawl Space



Plot of System (Not to Scale)

TP SAND TANK
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 ✓

Installed by A-1 BACKHOE
I understand and agree to install a septic tank system as specified on this Improvement Permit.
Signed.
(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY STEVE HERRICK

COMMENTS
REPAIR AREA IS 100% CONVENTIONAL GRAVITY-FED.

CERTIFICATE OF COMPLETION BY STEVE HERRICK DATE 7/31/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold

JAN. 2, 1989 5:42