04268

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 A Sankey Gaither III DATE 7-21-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Harmony - 21 N TR on Hayes St

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. 19-20 SECTION OR BLOCK NO. _____

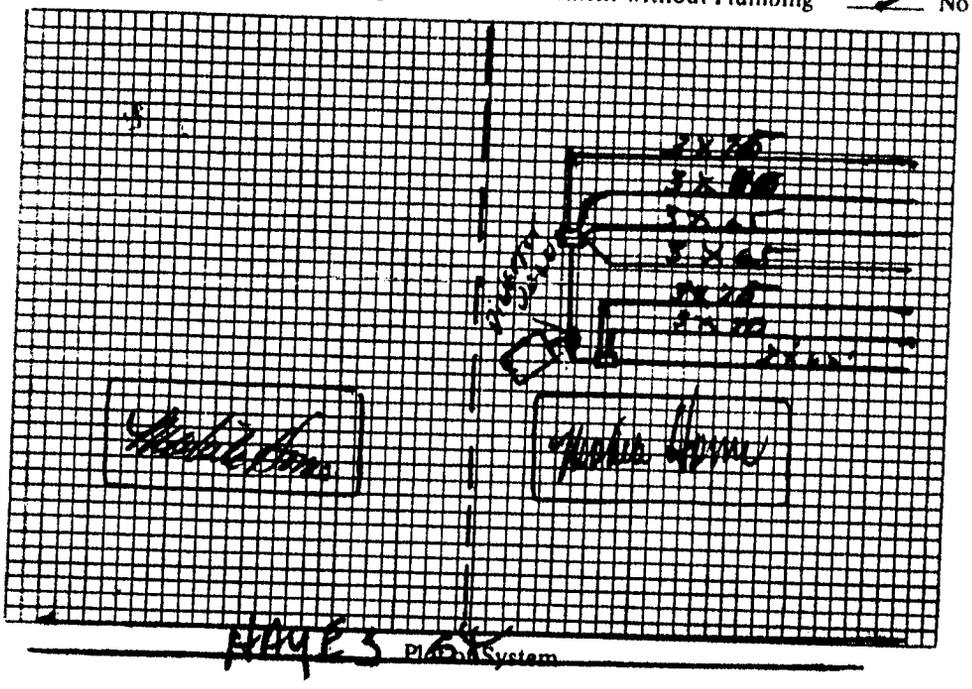
House ( ) Mobile Home (✓) Business ( ) Other Designed for 2 Mobile Homes

No. Bedrooms 4 No. Bathrooms 4

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Loam Sandy Loam
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	4 Set up for 2 Homes
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level to Rolling
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10' +
			Rock or other impervious formations	None

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 7
Sq. Ft. 1470 Linear Ft. 480
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by Jimmy Tyre

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Tolbert DATE 7/24/86

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