58043

IREDELL COUNTY HEALTH DEPARTMENT

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

11891

DATE 9/20/90 PERMIT NO. 174-A-65

OWNER OR CONTRACTOR JIMMY R. CAGLE

PHONE: Business 634-2016 Home

LOCATION US 21 N, TR POWELL RD, TL ROCK CREEK RD, TR ABBEYDALE, SITE ON (R) IN WOODED AREA S. R. No.

SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

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

No. Bedrooms 3 No. Bathrooms 2½

Character & Porosity of Soil 4

Percolation Rate 6-10"

Topography LS

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Depth to Water Table >4'

Rock or other impervious formations SCATTERED ROCK

Lot Area 2.1 AC

Basement with Plumbing ____ Basement without Plumbing ____ No Basement ✓

SST 6-1-90

Size of Tank 1000 Gals.

Nitrification Field:

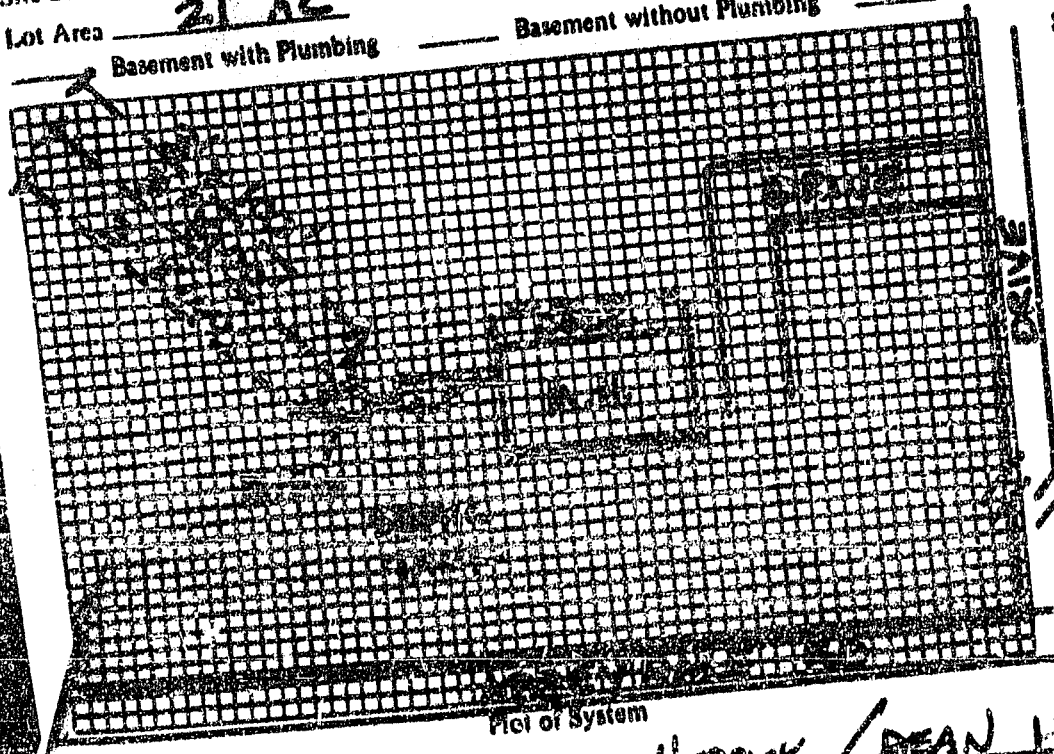
No. of Lines 3

Sq. Ft. 100 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ✓

Public ( )



Plot of System

Installed by DONALD LAKEY

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HENDRICK / DEAN HARRELL

COMMENTS: ① KEEP WELL MINIMUM 50' FROM SYSTEM

DATE _____

CERTIFICATE OF COMPLETION BY STEVE HENDRICK

DATE _____

EXISTING SYSTEM CHECKED BY:

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