IREDELL COUNTY HEALTH DEPARTMENT

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

12186

OWNER OR CONTRACTOR Terry D. Renegar DATE 11/13/90 PERMIT NO. 170-A.S.S.PT

PHONE: Business 872-5556 Home _____

LOCATION US 21N, TR Houstonville Rd, TL Stony Springs Rd, TR Imperial
~ ¼ Mi Site on (R) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 1
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil PS
Percolation Rate 4
Topography 2-4% LS
Depth to Water Table 54"
Rock or other impervious formations Weathered Rock

Lot Area .615

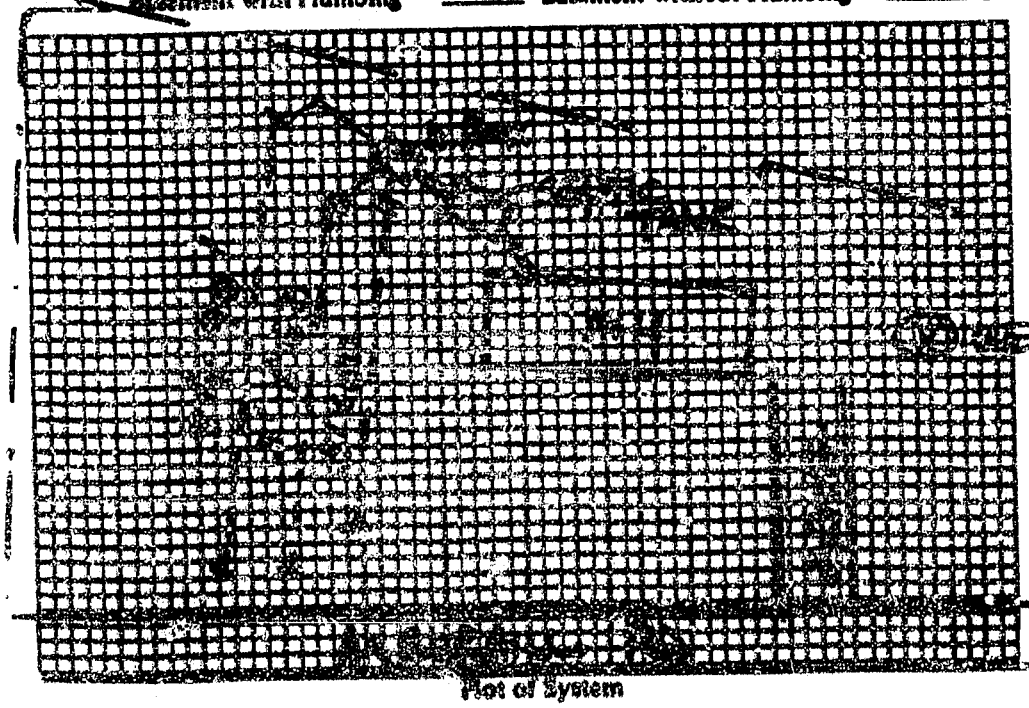
✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

CRS 8/11/90

Size of Tank 1060 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )



Plot of System

Installed by Tommy Nixon

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Hedrick

COMMENTS: Keep M/H minimum 5' from System

CERTIFICATE OF COMPLETION BY Steve Hedrick DATE 11/18/90

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