IREDELL COUNTY HEALTH DEPARTMENT

13553 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Mark E. Queen DATE 10/8/91 PERMIT NO. 20-1-A-196

PHONE: Business ______ Home 366-4509

LOCATION Brawley School Rd, TR on Stonemaker (L) around to gravel on back of peninsula, lot on (R) S. R. No. 1236

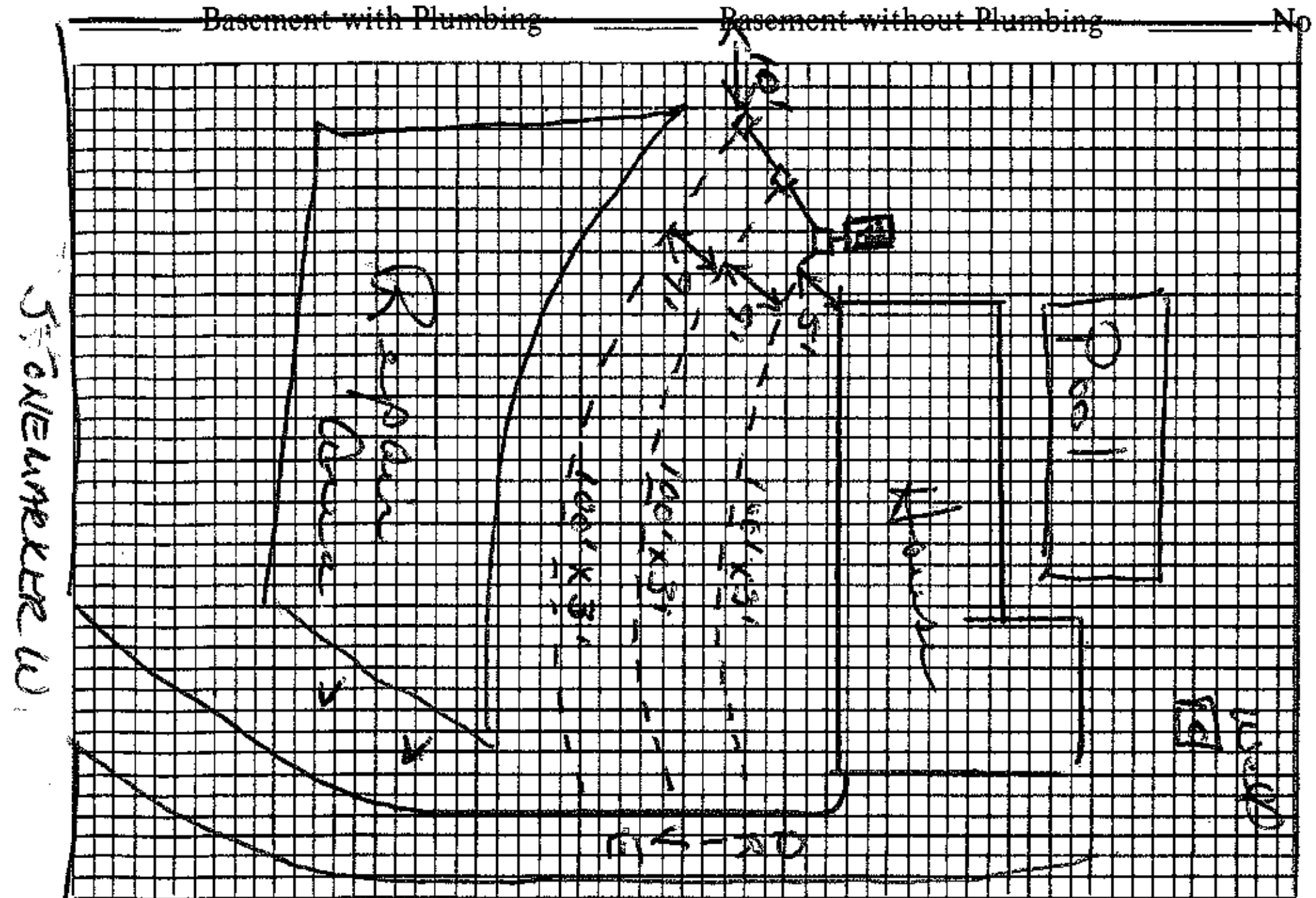
SUBDIVISION NAME Stonemaker LOT NO. 19 SECTION OR BLOCK NO. ______

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

No. Bedrooms 3 No. Bathrooms 2.5
Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 20,000 FT²

Character & Porosity of Soil P - SC - SF, wk structure
Percolation Rate .4
Topography 2-9%
Depth to Water Table >48"
Rock or other impervious formations No

~~Basement with Plumbing~~ ~~Basement without Plumbing~~ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3 @ 100' x 3'
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by ______

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

Signed: Mark E. Queen

IMPROVEMENTS PERMIT BY Wesley Sparks R.S.

COMMENTS: May use 4 lines 75' x 3' long if necessary. Drop boxes are needed. Drainlines may be 36" deep to trench bottom. Contours are complex.

CERTIFICATE OF COMPLETION BY ______ DATE ______

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