IREDELL COUNTY HEALTH DEPARTMENT 4626416597

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

OWNER OR CONTRACTOR Helen Brown DATE 5-27-83 PERMIT NO. 172

PHONE: Business _____ Home _____

LOCATION 1100 SR 1177 ~ ½ mile on R

_____ S. R. No. _____

SUBDIVISION NAME Holiday Harbor LOT NO. 82 SECTION OR BLOCK NO. _____

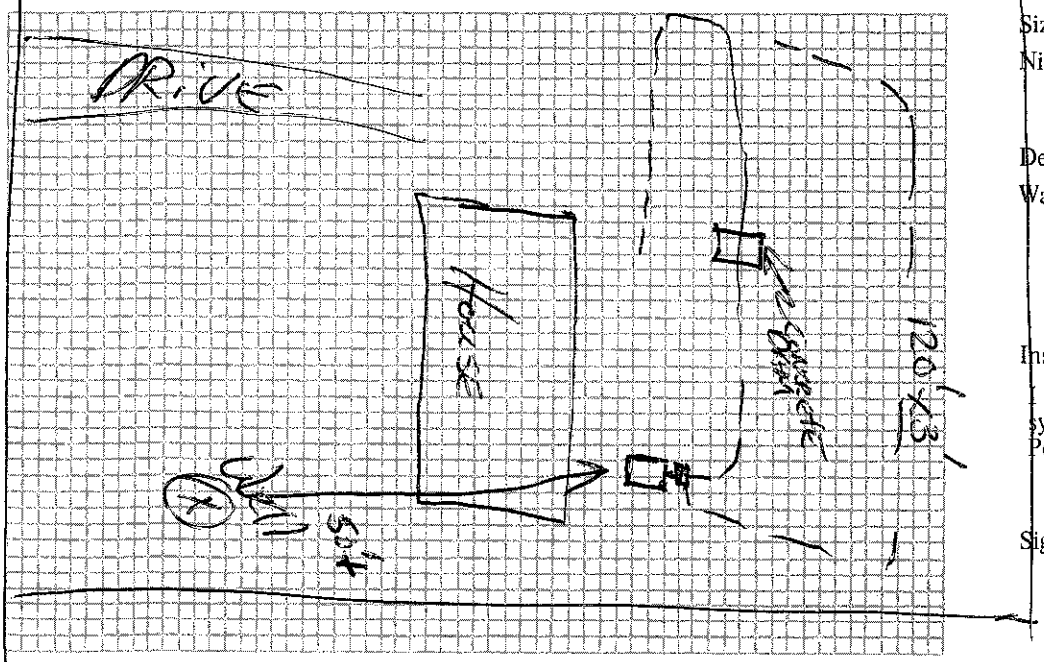
House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	~ 0.5 gal/ft²/day
Auto. Wash. Machine	Yes (X)	No ( )	Topography	~ 2%
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'+
			Rock or other impervious formations	None observed

Lot Area ~20,000 ft²

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 2

No. of Lines _____

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by J. Erwin

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

Signed: _____

IMPROVEMENTS PERMIT BY David Hinson

COMMENTS Installed Concrete dam in middle of lower line Rear had 18" of Fall — upper line 5" of fall

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 5-27-83

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