IREDELL COUNTY HEALTH DEPARTMENT

11734 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR James Haggerty DATE 10/16/91 PERMIT NO 2F10-A-3

PHONE: Business _____ Home 664 3485

LOCATION McKendree Rd 1100 TR McKendree, on right across from McKendree Chapel S. R. No. _____

SUBDIVISION NAME Brookridge Shores LOT NO. 3 SECTION OR BLOCK NO. _____

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

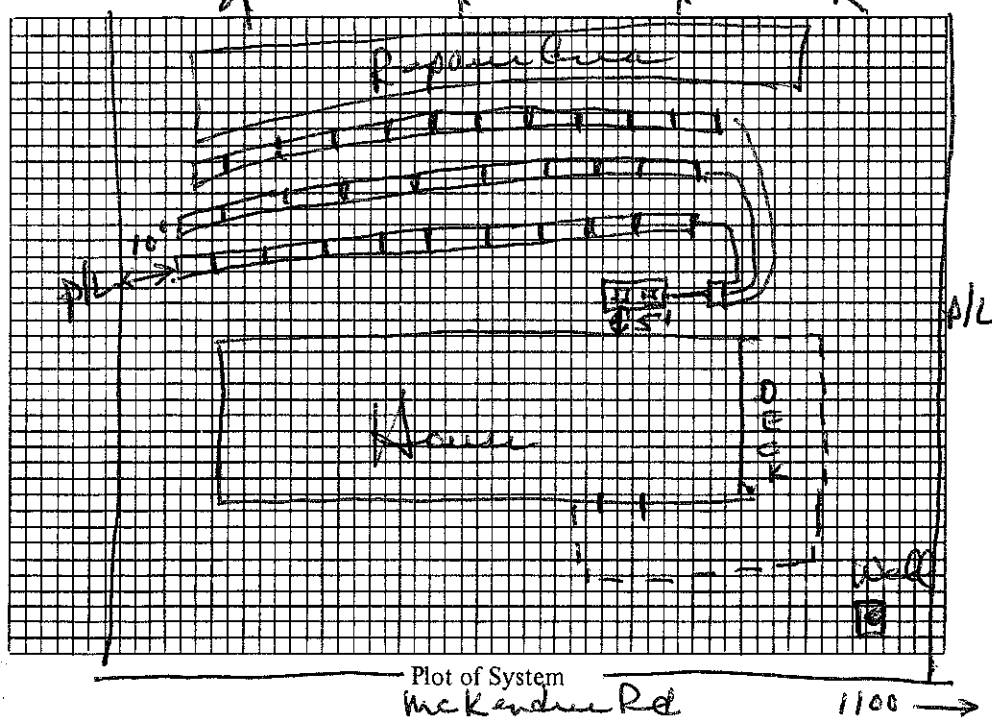
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil A-c-(sd)
Percolation Rate 3
Topography S-Te
Depth to Water Table 48"
Rock or other impervious formations None observed

Lot Area NONE GIVEN ON P.D.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 240
Depth of ~~Stone~~ SAND in Lines Leader - 10" Gravel
Water Supply: Individual (✓)
Public ( )

Installed by Walter Barton

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 10/16/91

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