IREDELL COUNTY HEALTH DEPARTMENT

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

OWNER OR CONTRACTOR Ray Cook DATE 11-12-93 PERMIT NO. 288

PHONE: Business ____ Home ____

LOCATION Hwy 70 W to NC 115 S 2nd rd to left on right

S. R. No. ____

SUBDIVISION NAME Cline's Point LOT NO. 396 SECTION OR BLOCK NO. ____

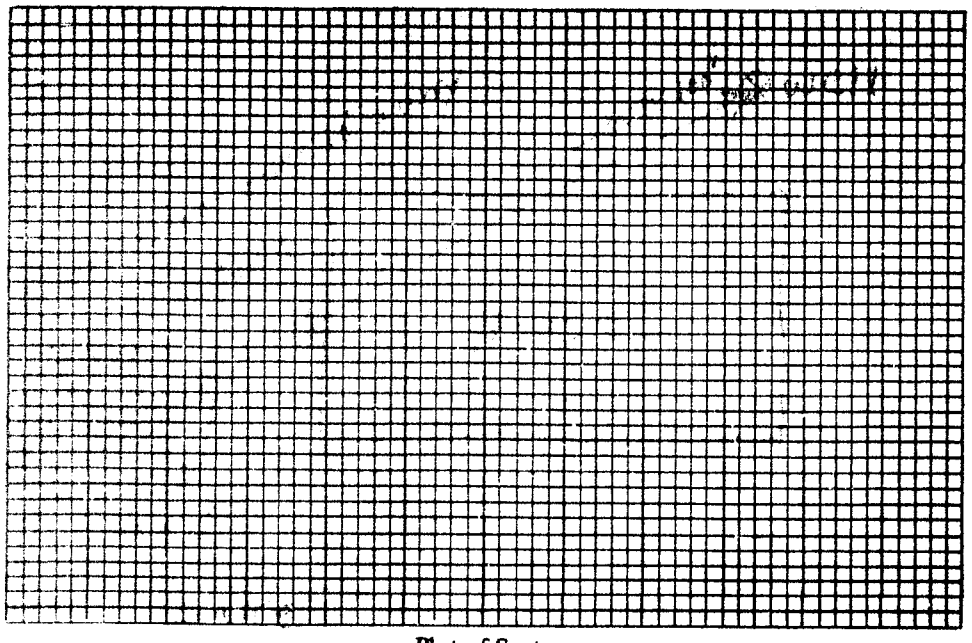
House ( ) Mobile Home ( ) Business ( ) Other ____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1/2 acre

Character & Porosity of Soil Poor Soil (tight clay)
Percolation Rate Not taken
Topography Severe Steep to Lake
Depth to Water Table 10'
Rock or other impervious formations large amount of subsurface rock



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3 + 3
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12
Water Supply: Individual (✓)
Public ( )

Installed by E. T. Ervin

IMPROVEMENTS PERMIT BY Not issued. House started before OK'd

COMMENTS: Lot was poor for septic Tank layout. Large amount of subsurface rock & soil. Also Topography was poor for install. System approved on cont. only

CERTIFICATE OF COMPLETION BY E. C. Wyatt DATE 11-15

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold