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 Martha Farrell DATE 5-0-04 PERMIT NO. 110

PHONE: Business _____ Home 596-1591

LOCATION 1100 Tl on 1112 at end TR. ½ mi on left _____ S. R. No. _____

SUBDIVISION NAME Imperial Point LOT NO. 4 SECTION OR BLOCK NO. _____

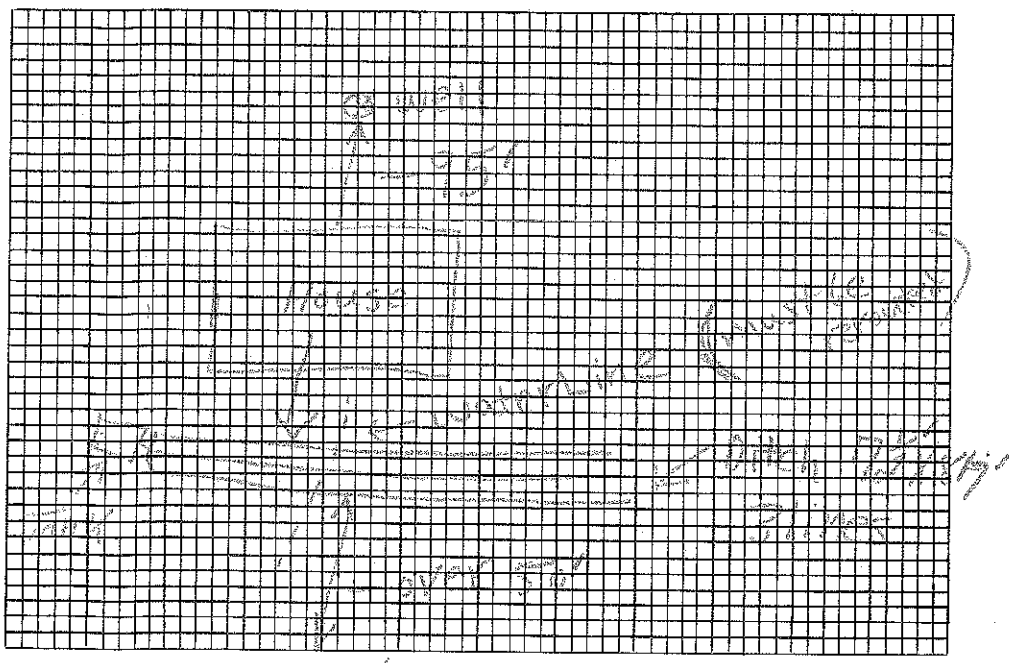
House (✓) Mobile Home ( ) Business ( ) Other _____

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 ½ acre

Character & Porosity of Soil Sandy clay. Porosity good
Percolation Rate not taken
Topography 20% Slope
Depth to Water Table 10'+
Rock or other impervious formations none



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 525 Linear Ft. 261
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by E. J. Irvin

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: Re route water line that is with in 10' of septic tank Drain Line

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 5-2-04

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