4635-57-5796

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 Agostino Dimillo DATE 8-26-96 PERMIT NO. 239

PHONE: Business _____ Home _____

LOCATION 1100 TL on 1112 at cnt TR 1/4 mi on right

S. R. No. _____

SUBDIVISION NAME Bayview Estates LOT NO. 45 SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 1/2 acre

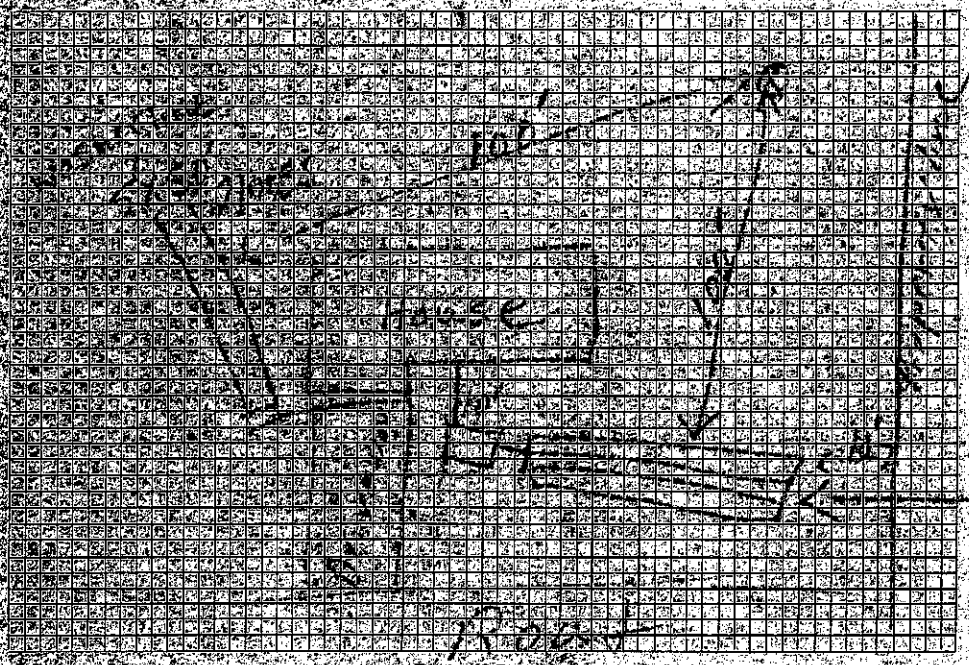
Character & Porosity of Soil Clay loam Porosity Fair

Percolation Rate not taken

Topography 7-25% Slope

Depth to Water Table 10' +

Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by F. J. Ervin

Washing machine line 100' 250 sq ft

IMPROVEMENTS PERMIT BY F. C. Moore

COMMENTS: Nitrification Ditch was deep due to repositioning of house.

CERTIFICATE OF COMPLETION BY F. C. Moore DATE 8-26-96

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