11:00

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 Claude J. Hartsell DATE 9-8-80 PERMIT NO. 252

PHONE: Business _____ Home _____

LOCATION 1100 FT. - 1112 TR 1267 (SHORE LINE DR.VE) ON R just Road 1269

SUBDIVISION NAME Bayview ~~Shores~~ Estates LOT NO. 9 SECTION OR BLOCK NO. _____ S. R. No. _____

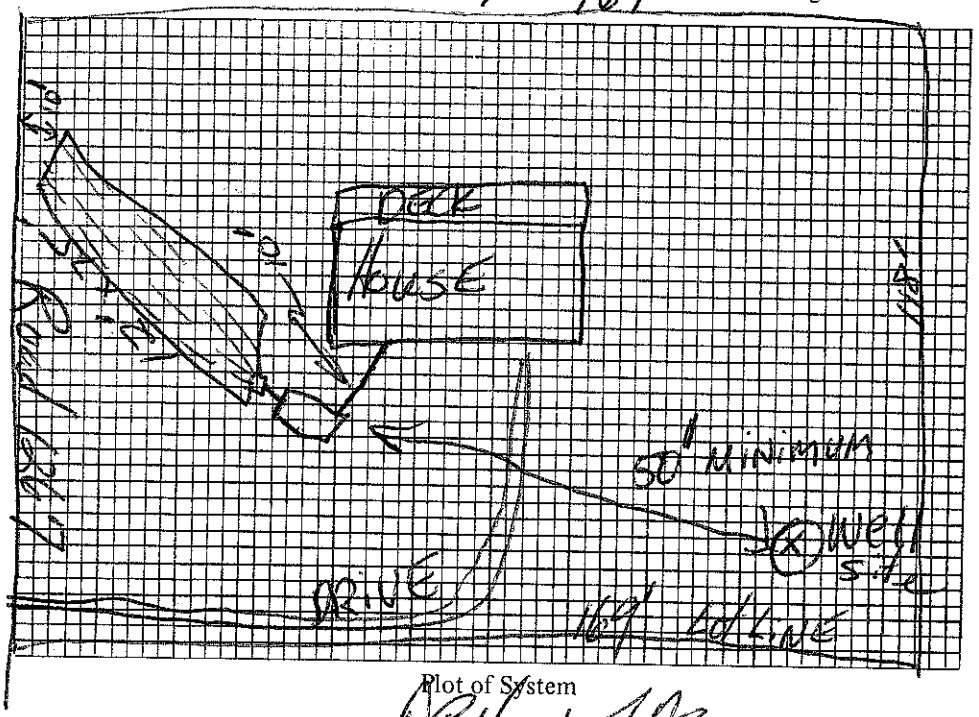
House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	100 MPI
Auto. Wash. Machine	Yes (X)	No ( )	Topography	2-8%
Site Suitable	Yes (X)	No ( )	Depth to Water Table	unknown
			Rock or other impervious formations	NONE observed

Lot Area 20,000 ft²

_____ Basement with Plumbing X Basement without Plumbing 16' _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"

Water Supply: Individual (X)
Public ( )

Installed by _____

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

Signed: X Claude J. Hartsell

IMPROVEMENTS PERMIT BY DRH + JR

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

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