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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 Donald R. Haseley DATE Sept. 27, 91 PERMIT NO. 2G-11-A-7

PHONE: Business _____ Home _____

LOCATION 1100 TL 1112 (Stutts Rd.) TR 1st Shoreline Loop on Right S. R. No. _____

SUBDIVISION NAME Bayview Estates LOT NO. 7 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes ( ) No ( )

Lot Area 118'X169'

Character & Porosity of Soil PS clay/trans

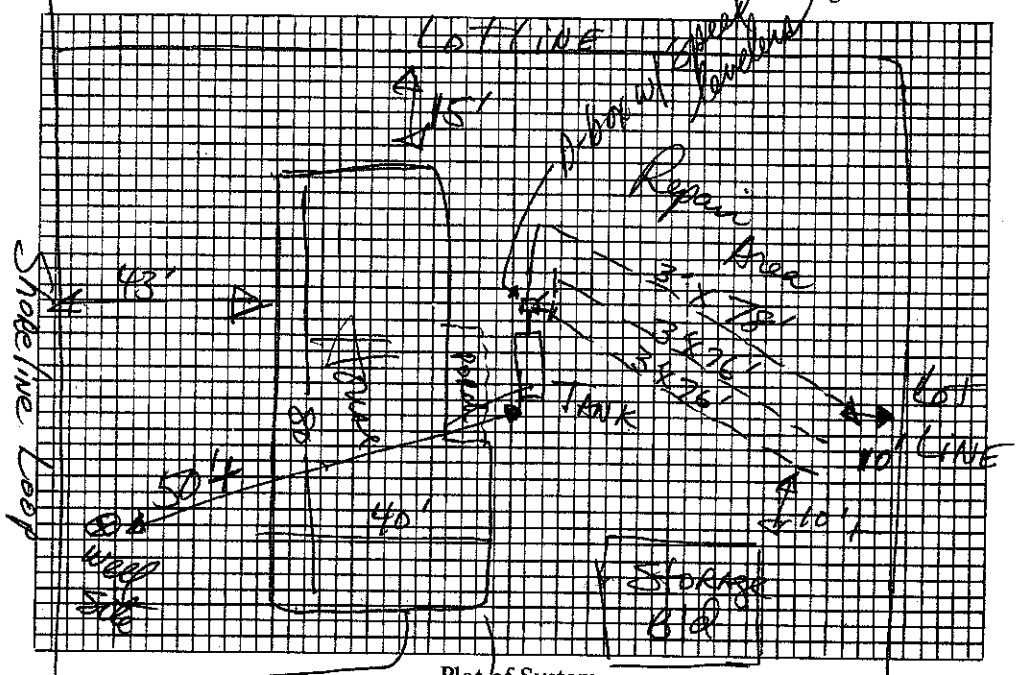
Percolation Rate 2.35

Topography 2-4%

Depth to Water Table 41"

Rock or other impervious formations none Obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 690 Linear Ft. 230

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by _____

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

Signed: ✓ Donald R. Haseley

DRIVEWAY LOTLINE

IMPROVEMENTS PERMIT BY David R. Hamm, RS.

COMMENTS: Follow contour - install trenches between 24" and 30" trench bottom depth.

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