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 Gene Spruill DATE 12-4-95 PERMIT NO. 311

PHONE: Business _____ Home _____

LOCATION just past the end of 112 left on Cove View

S. R. No. 112

SUBDIVISION NAME Cove View Park LOT NO. 23 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area approx. 100 by 200

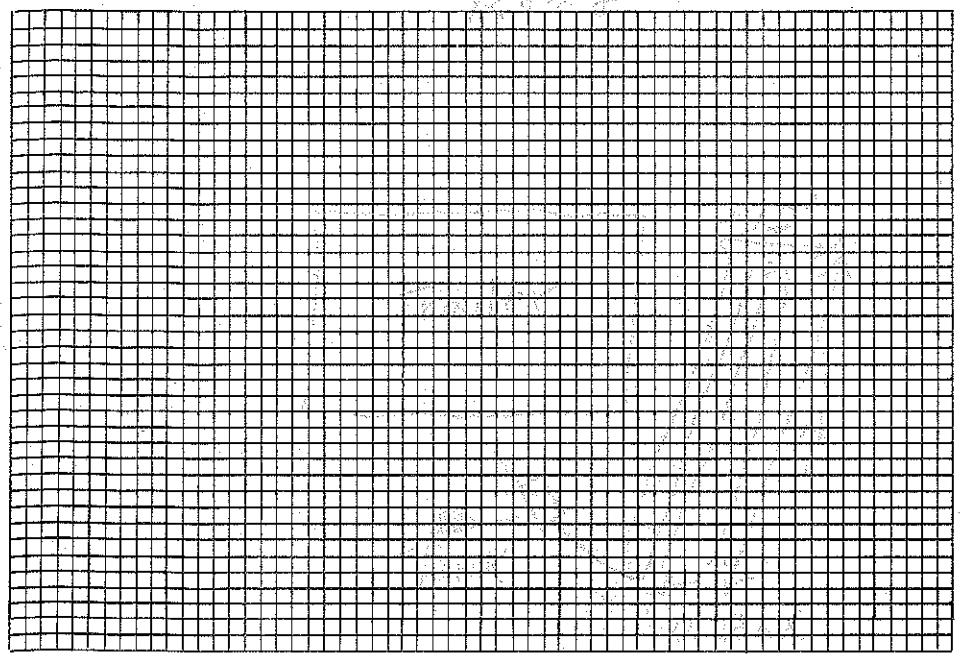
Character & Porosity of Soil sandy loam

Percolation Rate 10 min

Topography slope

Depth to Water Table 24"

Rock or other impervious formations loose rock at 18" bedrock 120" under surface at bottom



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 276 Linear Ft. 230

Depth of Stone in Lines 24"

Water Supply: Individual ( )
Public ( )

Installed by Field Services

IMPROVEMENTS PERMIT BY Mark Reed, Parker must be Present

COMMENTS: Lot is very close for septic tank system. The back 3rd of lot is unsuitable. Water level could be a serious problem in the function of this system.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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