4636-86-4145

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 Draft Inc. DATE 7-24-79 PERMIT NO. 252

PHONE: Business _____ Home _____

LOCATION 1100 ft on 1179

S. R. No. _____

SUBDIVISION NAME Mallard Head LOT NO. 66 SECTION OR BLOCK NO. 1

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

No. Bedrooms 3 No. Bathrooms 2½ In Fairway

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area ½ Ac.

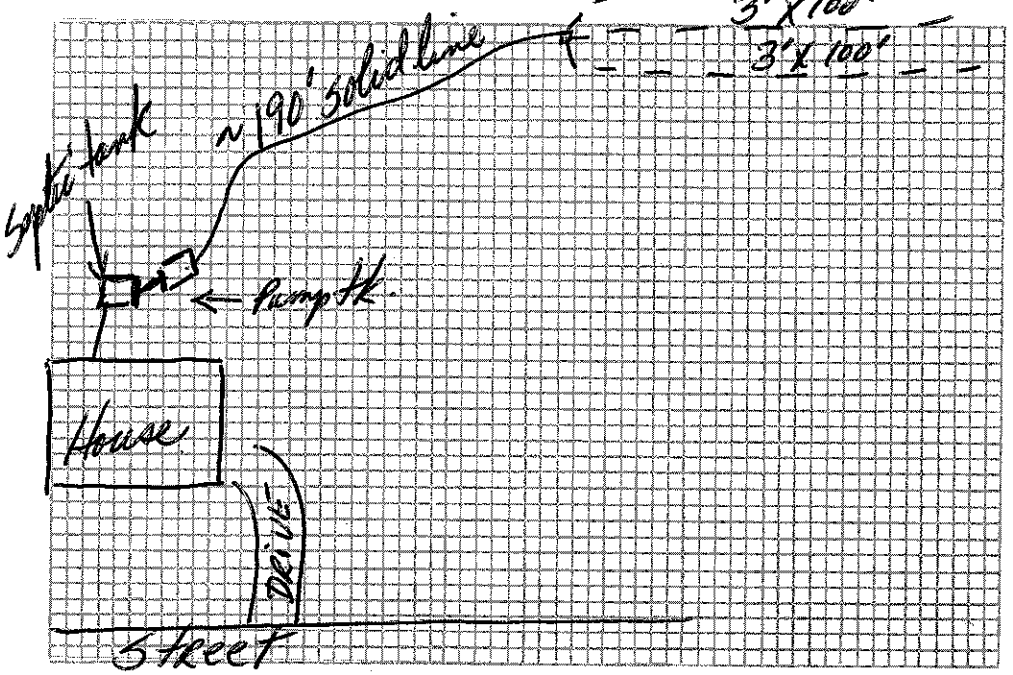
Character & Porosity of Soil Clay loam

Percolation Rate 50 mpi

Topography 2-4%

Depth to Water Table sink.

Rock or other impervious formations none obs.



Plot of System

1500 gal pump tank

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)
Community Well

Installed by F J Ervin

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Henson DATE 7-24-79

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