IREDELL COUNTY HEALTH DEPARTMENT 4636931553

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Phil McCowen DATE 5-18-81 PERMIT NO. 140

PHONE: Business _____ Home _____

LOCATION 1100 ft 1179 pass Reynolds R.E. Office TR 1st St.

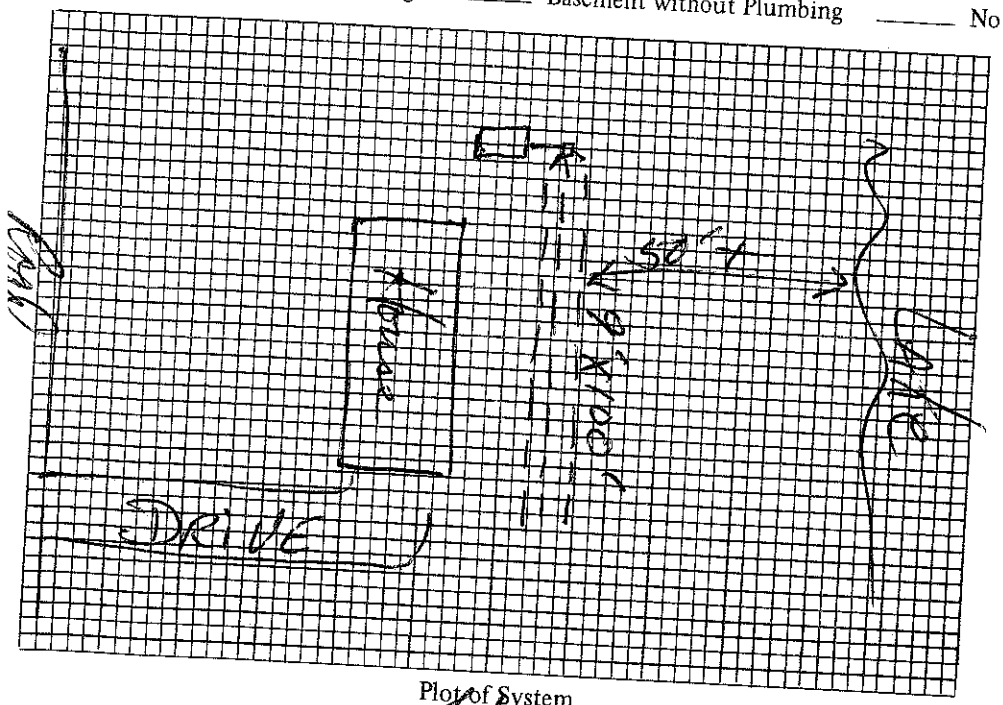
SUBDIVISION NAME Woodland Hills LOT NO. 97 SECTION OR BLOCK NO. 4 S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	clay loam
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	120-240 mpi
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6-8%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+
Lot Area ½ AC.			Rock or other impervious formations	Scattered large rock

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"

Water Supply: Individual ( )
Public (✓)
Mallard Head Community

Installed by J. Ewan

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

Signed: _____

IMPROVEMENTS PERMIT BY TAC

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Hinson

EXISTING SYSTEM CHECKED BY: _____ DATE 5-18-81

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