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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 Paltech Const. DATE 7/11/91 PERMIT NO. 2L-7-D-46

PHONE: Business _____ Home 664-6981

LOCATION 150W, TL past Apple House into Spring Acres TL to lot on (R)

S. R. No. _____

SUBDIVISION NAME Spring Acres LOT NO. 46 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2-3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Character & Porosity of Soil P - clay - SCL

Percolation Rate .35 (4")

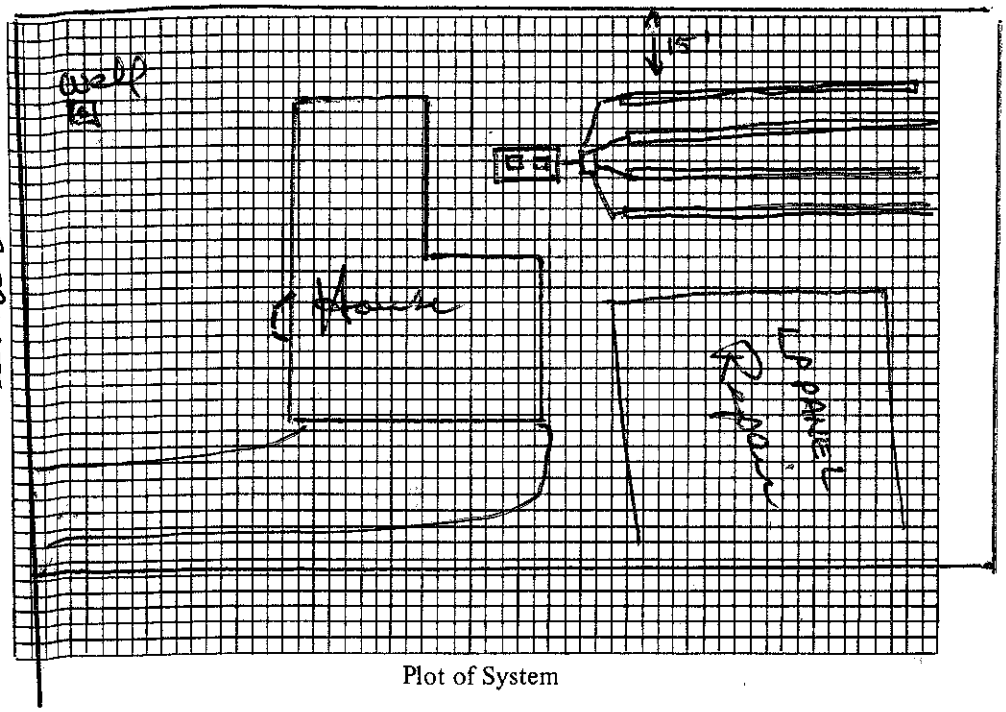
Topography 2-4%

Depth to Water Table >48"

Rock or other impervious formations None observed

Lot Area 20,000 FT²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 4@50'

Sq. Ft. _____ Linear Ft. 200

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )

16" Panel System

Installed by F.T. Carver

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks R.S. DATE 7/11/91

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