IREDELL COUNTY HEALTH DEPARTMENT 4638-66-9274

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

OWNER OR CONTRACTOR Daniel Hardison DATE 6-24-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1303 N. TL Bellbouy Rd. (1452) a ½ mile on left (Hideaway Ln.) S. R. No. _____

SUBDIVISION NAME L.N. CLAT LOT NO. 1056 SECTION OR BLOCK NO. 14

Future Temporary

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil clay
Percolation Rate 1.4
Topography 2-6%
Depth to Water Table 4'
Rock or other impervious formations none obs.

Lot Area 20000 ft²

_____ Basement with Plumbing 54 Basement without Plumbing ✓ No Basement

1000 gal pump tank

Size of Tank 1500 Gals.

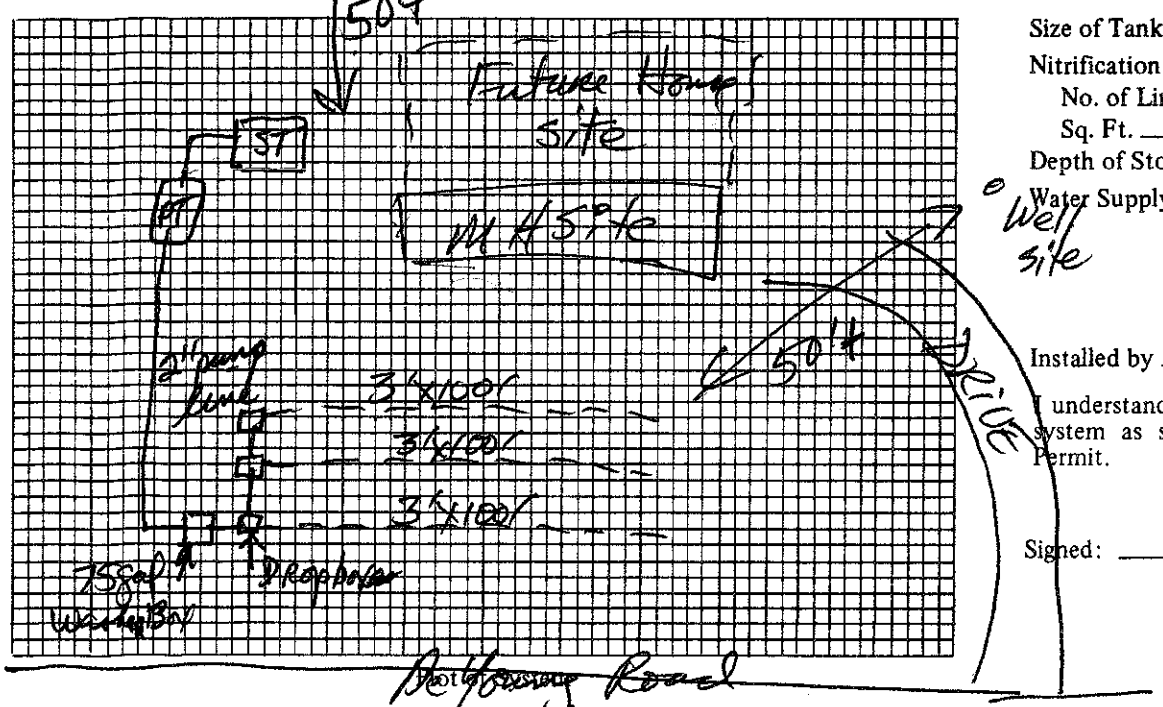
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Dobson

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

Signed: _____



IMPROVEMENTS PERMIT BY _____

COMMENTS: Changes in system layout deemed acceptable.

CERTIFICATE OF COMPLETION BY D R Jenson, RS DATE 6-24-87

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