IREDELL COUNTY HEALTH DEPARTMENT 4645-34-3877

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

OWNER OR CONTRACTOR Joe Inman DATE 5-2-80 PERMIT NO. 110

PHONE: Business _____ Home _____

LOCATION 1206 TR on 1108 TR Queen's Cove Lot on left on water

SUBDIVISION NAME Queen's Cove S. R. No. _____

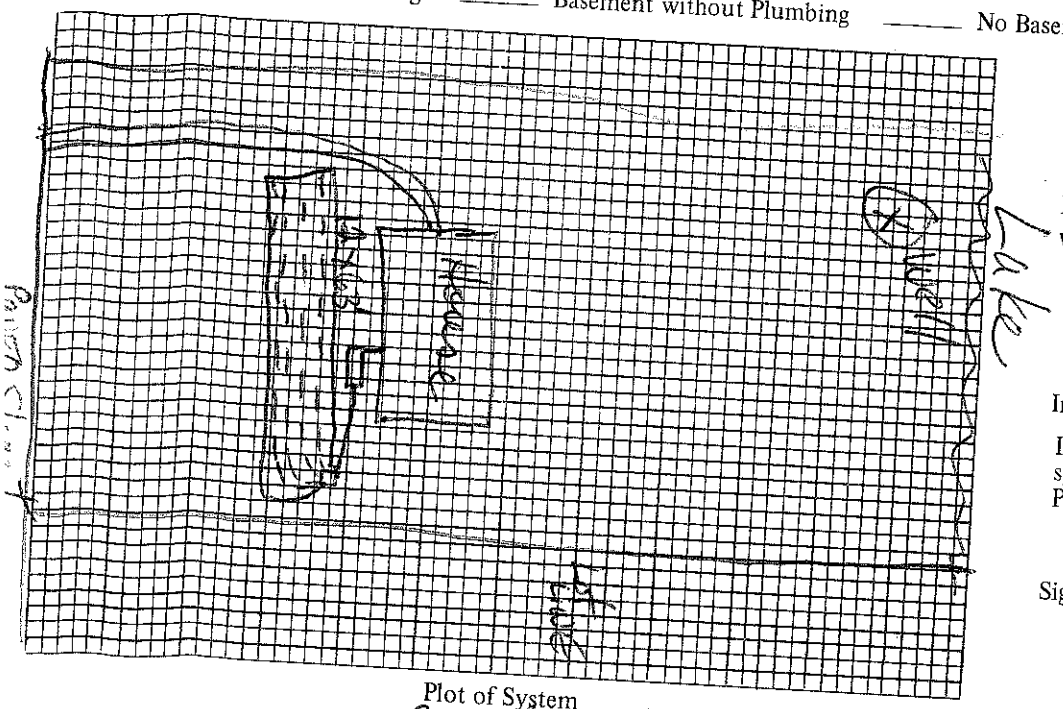
LOT NO. 16 SECTION OR BLOCK NO. 1

House (X) 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	20 MPI
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4-6%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	UNKNOWN
Lot Area 20,000 ft²			Rock or other impervious formations	None observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16"

Water Supply: Individual (X)
Public ( )

Installed by J. J. Erwin

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

Signed: _____

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer

EXISTING SYSTEM CHECKED BY: _____ DATE 5-2-80

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.

DATE _____

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold