11351

IREDELL COUNTY HEALTH DEPARTMENT

4645-37-0864

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Joe Hollar

PHONE: Business _____ Home _____ DATE Feb. 13, '91 PERMIT NO. 24-11-B-15

LOCATION 215 X I77 TL 1206 (Alcove) TR 1108 (Templeton) on left 3rd lot past 1st entrance into Queens Cove

SUBDIVISION NAME Queens Cove LOT NO. 15 S. R. No. _____

House (✓) Mobile Home ( ) Business ( ) Other _____ SECTION OR BLOCK NO. 2

No. Bedrooms 4 No. Bathrooms 2½

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

Lot Area ~2½ Ac

Character & Porosity of Soil sl clay

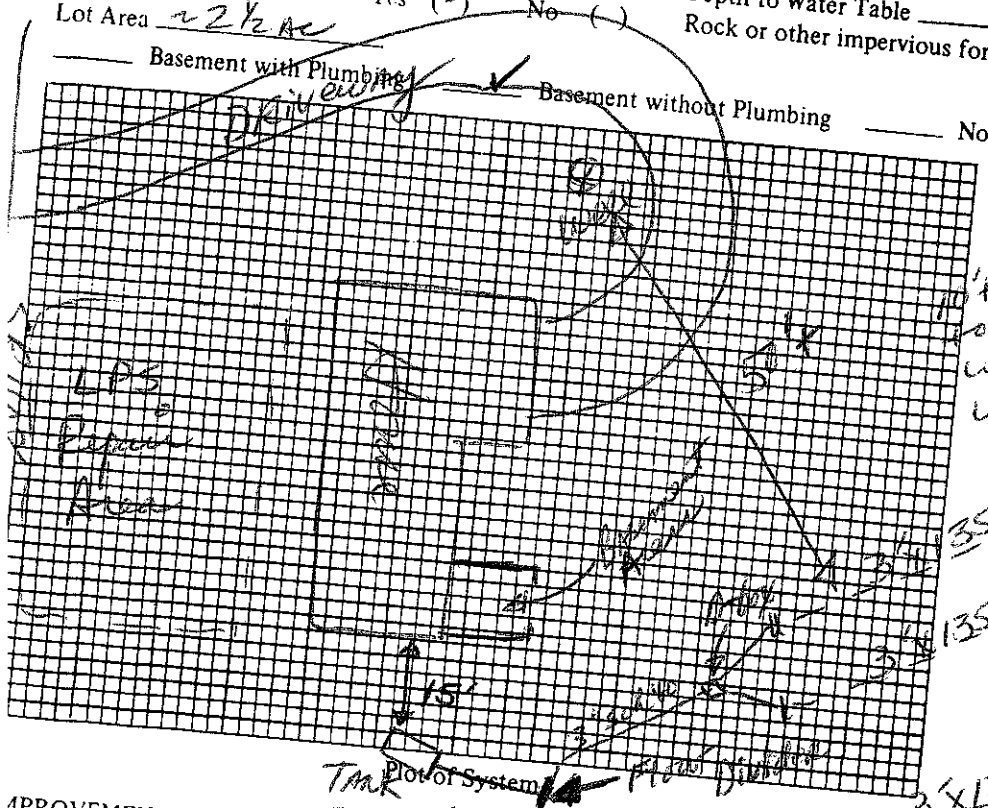
Percolation Rate 4, 3

Topography 2-4%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement



Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1620 Linear Ft. 540

Depth of Stone in Lines 12"

Water Supply: Individual (✓) Public ( )

Installed by Jason Benton

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

Repair Area

Basement added after imp. permit issued.

CERTIFICATE OF COMPLETION BY DRHenson / EHS DATE 2-13-91

SEPTIC SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

It 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