IREDELL COUNTY HEALTH DEPARTMENT 4645-46-0579

10530

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

OWNER OR CONTRACTOR Charles W. Tregise DATE June 15, '90 PERMIT NO. 24-11-B-7

PHONE: Business _____ Home _____

LOCATION 215 x I77 TL 1306 (A/cove) TR 1108 (Templeton) TL Harwell (1st Queens Cove entrance) ~ 1/4 mile on left S. R. No. _____

SUBDIVISION NAME Queens Cove II LOT NO. 7 SECTION OR BLOCK NO. 2

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

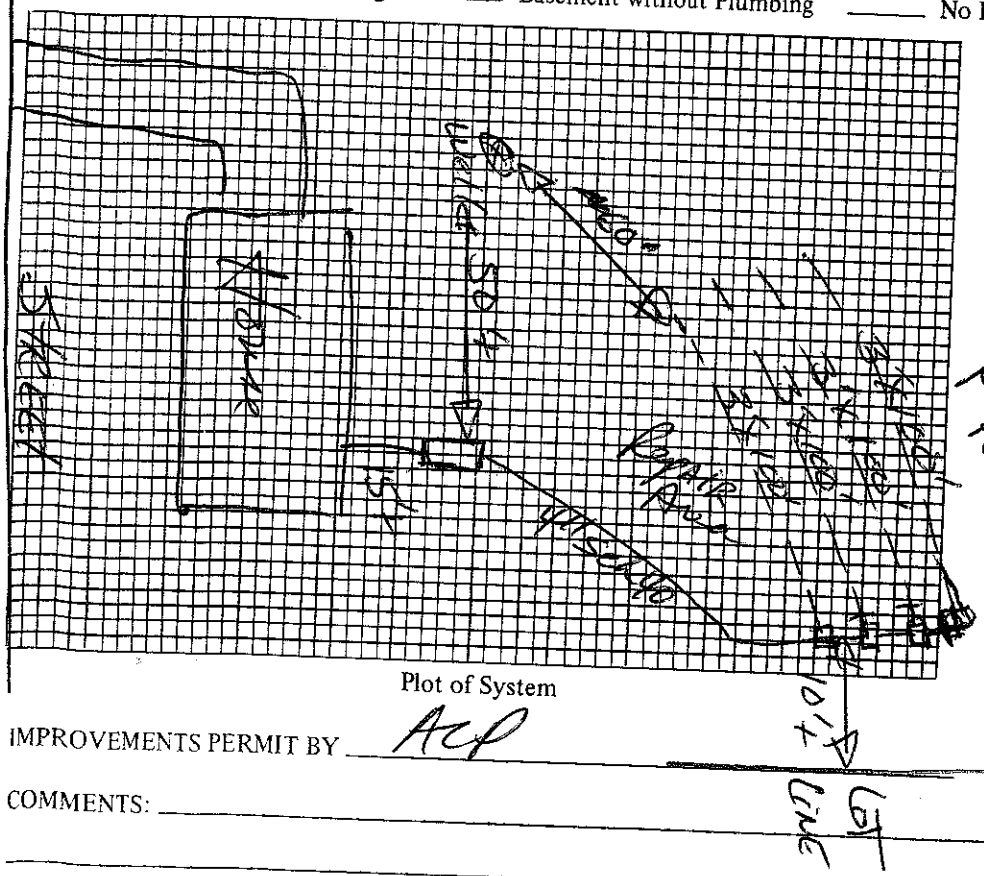
No. Bedrooms 4 No. Bathrooms 2

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

Character & Porosity of Soil fs clay
Percolation Rate no 4
Topography 6%
Depth to Water Table 4'
Rock or other impervious formations none obs.

Lot Area ~4 Ac.

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement



Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 200 Linear Ft. 480
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by J R Bowles
I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature], EHS

EXISTING SYSTEM CHECKED BY: _____ DATE 6-15-90

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

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