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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 Lee Laney DATE 9-1-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 S. X I-77 TL 1206 (Alcove) TR Perrin Drive Bear Rt. Waters Edge TL 1st Street on left.

SUBDIVISION NAME Waters Edge LOT NO. 28 (3) S. R. No. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2 1/2

Garbage Disposal Unit lake Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 20000ft²

Character & Porosity of Soil Clay

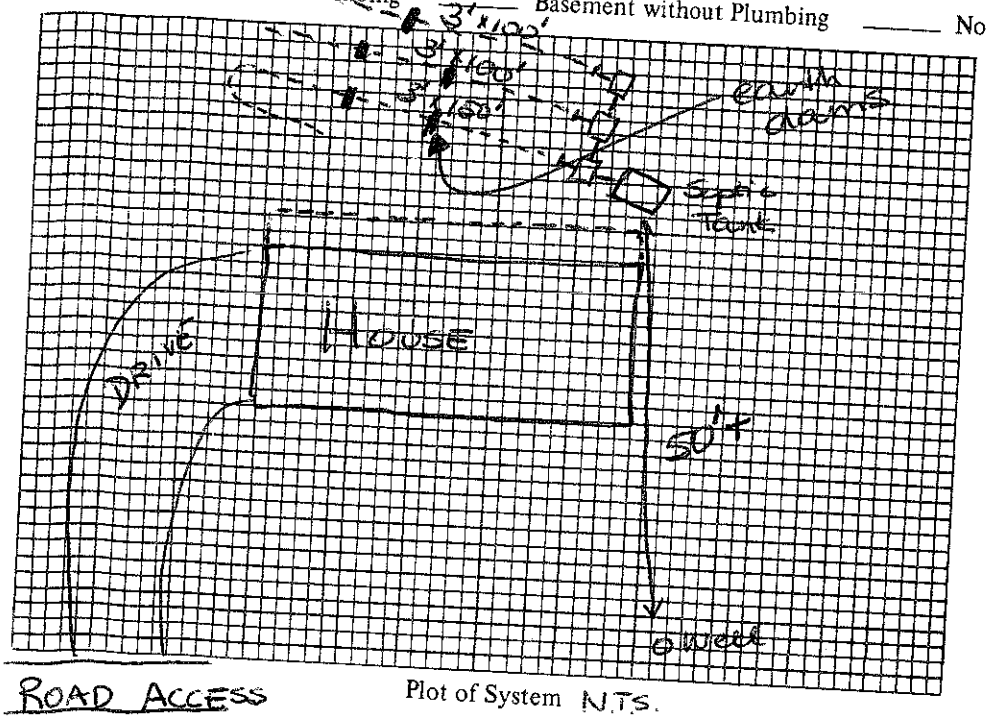
Percolation Rate ~4

Topography 6-15%

Depth to Water Table 4'+

Rock or other impervious formations none observed

✓ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System N.T.S.

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1050 Linear Ft. 350

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by ~~LaVerne~~ Leron Benton.

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: extra 50' on 1st line added to compensate for excess fall in line. Earth dams are also added

CERTIFICATE OF COMPLETION BY Andrew C. Reese

EXISTING SYSTEM CHECKED BY: _____ DATE 9-1-87

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