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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 Bell Construction DATE 6-30-97 PERMIT NO. 125

PHONE: Business _____ Home _____

LOCATION Hwy 115 N. on 1140

S. R. No. _____

SUBDIVISION NAME Woodland Estates LOT NO. 20 SECTION OR BLOCK NO. _____

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 ( )

Lot Area 1 Acre

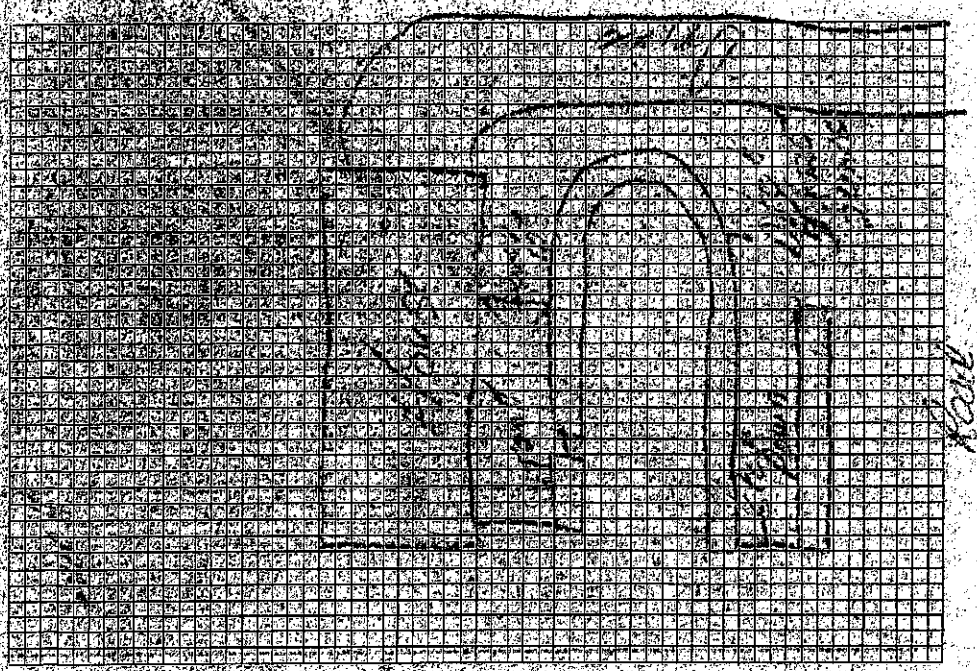
Character & Porosity of Soil Clay loam Fair

Percolation Rate 5 min/in @ 24"

Topography 2% Slope

Depth to Water Table 10'

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field

No. of Lines 3

Sq. Ft. 225 Linear Ft. 225

Depth of Stone in Lines 24"

Water Supply: Individual (✓)

Public ( )

Installed by Bonnie Bell

IMPROVEMENTS PERMIT BY [signature]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 6-30-97

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

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