4646382983

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 Garland Hudgens DATE 4-30-82 PERMIT NO. 121

PHONE: Business _____ Home _____

LOCATION 150W TR 1109 TR 1190 5th on left before 1290 S. R. No. _____

SUBDIVISION NAME Idlewood Harbor LOT NO. 49 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	
Auto. Dishwasher	Yes (X)	No ( )	
Auto. Wash. Machine	Yes (X)	No ( )	
Site Suitable	Yes (X)	No ( )	

Lot Area 20,000 Sq Ft

Character & Porosity of Soil Clay loam

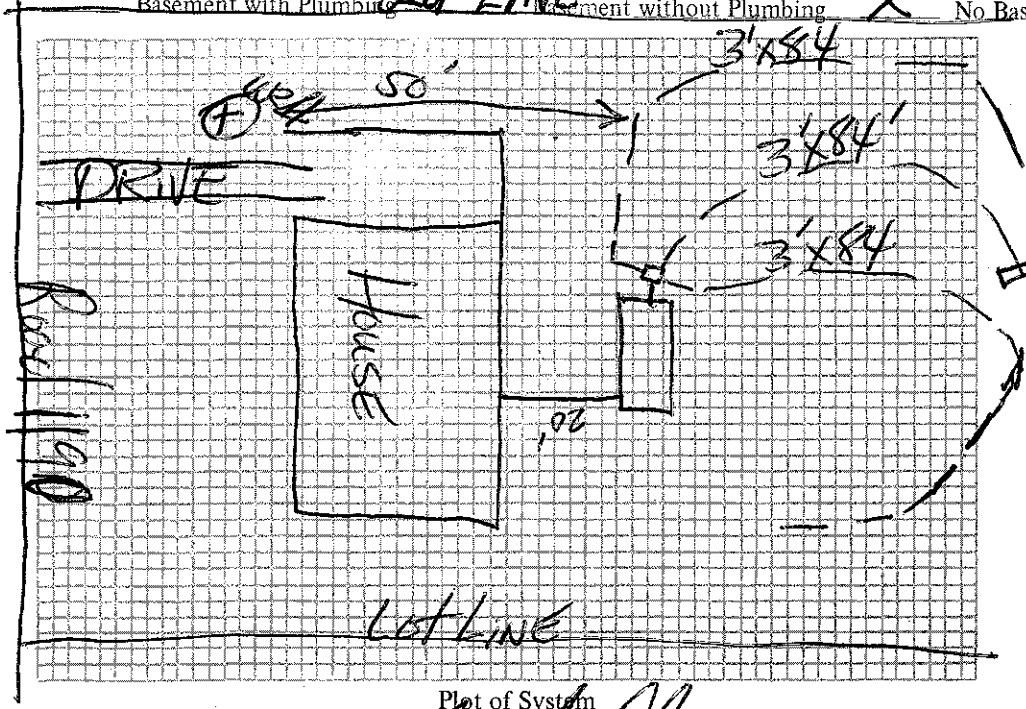
Percolation Rate 60 min per 2 in

Topography Sloping

Depth to Water Table unknown

Rock or other impervious formations None observed

Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines _____

Water Supply: Individual (X)

Public ( )

Installed by J. Erwin Co.

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 4-30-82

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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