IREDELL COUNTY HEALTH DEPARTMENT 4646 47 1067

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

OWNER OR CONTRACTOR Robert Williams DATE Jan 9,'87 PERMIT NO. 22

PHONE: Business _____ Home _____

LOCATION Elysian Drive 228 Elysian

SUBDIVISION NAME Moreland Estates LOT NO. 32 SECTION OR BLOCK NO. _____ S. R. No. _____

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

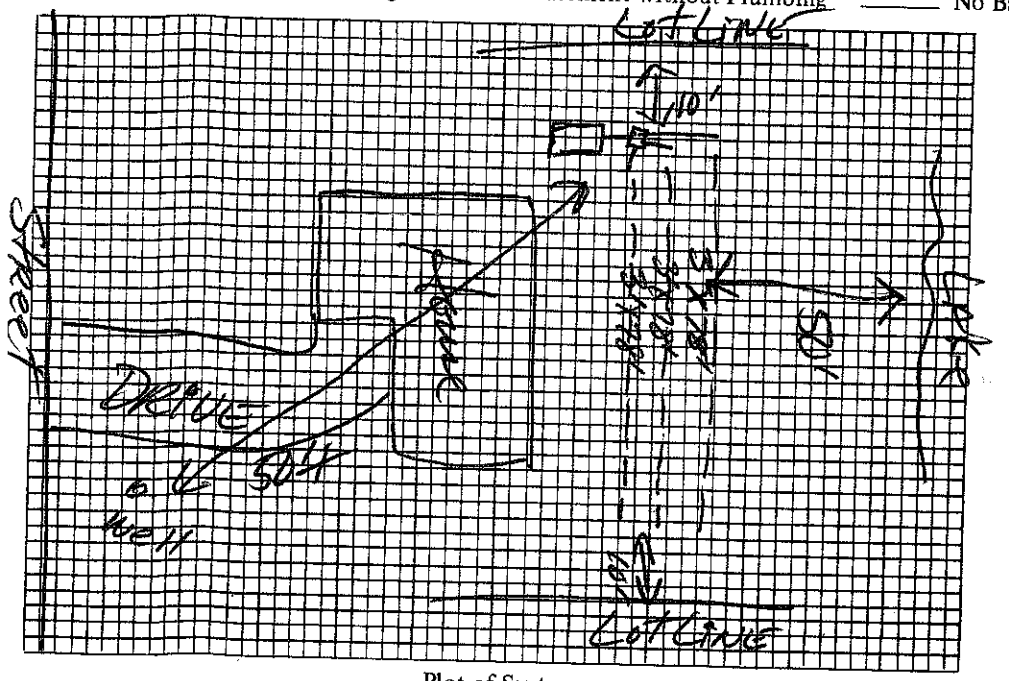
No. Bedrooms 3 No. Bathrooms 3

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

Lot Area 20000 sq ft +

Character & Porosity of Soil Clay
Percolation Rate 5
Topography 4-6%
Depth to Water Table 4ft
Rock or other impervious formations none obs.

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. ~720 Linear Ft. ~240
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Ray Beaver

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

Signed: _____

IMPROVEMENTS PERMIT BY JCM & CKB

COMMENTS: Each ditch ~2' short in order to keep 10' off lot line.

CERTIFICATE OF COMPLETION BY Darrell R. Hunter, RS. DATE Jan 9, '87

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