4654-88-5325

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 Bobby Honeycutt DATE 4/18/89 ~~PERMIT NO.~~

PHONE: Business _____ Home _____

LOCATION 115 S. TL 1138 (Presbyterian) On Rt ~ 1/8 mi. before Creek S. R. No. _____

SUBDIVISION NAME Hillcreek LOT NO. 8 SECTION OR BLOCK NO. _____

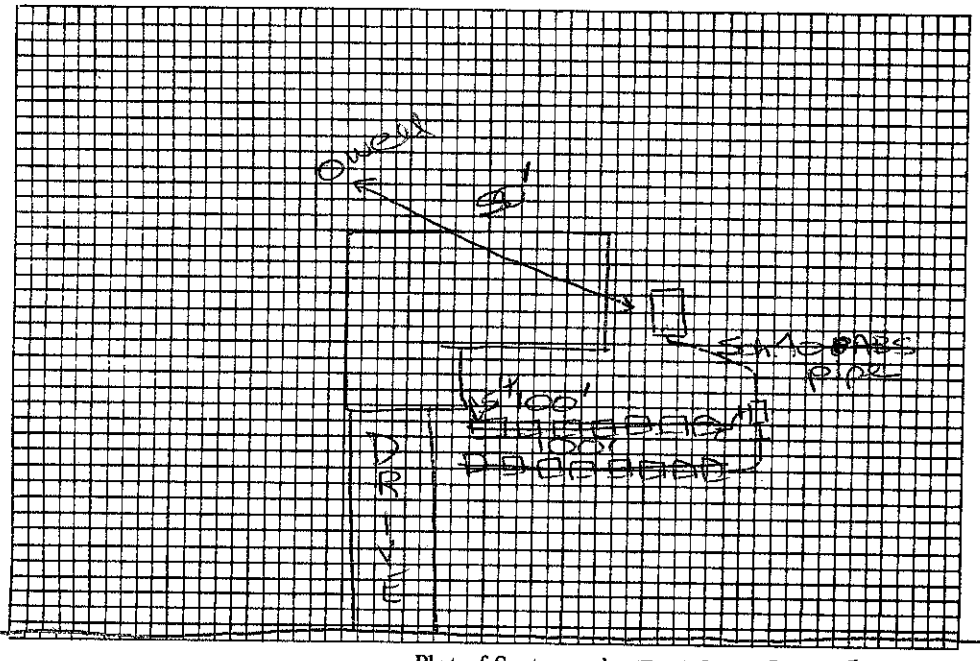
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.3 - .35
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2 - 6%
Site ~~Suitable~~ P.S.	Yes ( )	No ( )	Depth to Water Table	4'+
			Rock or other impervious formations	none

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System NOT TO SCALE

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. _____ Linear Ft. 200' of
Depth of Stone in Lines 16" Trench
Water Supply: Individual (✓) 5 panels
Public ( )

Installed by F.J. Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrea C. Price DATE 4/18/89

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