Tue
9:30

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 J. Ed. Land & Timber DATE 3/28/85 PERMIT NO. 130

PHONE: Business _____ Home _____

LOCATION Shearers Chapel, Rt on Faith Rd, Approx 3 miles on Lt at Corner of Dirt Street

SUBDIVISION NAME L.C. Caldwell Estates LOT NO. 3 SECTION OR BLOCK NO. _____ S. R. No. _____

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

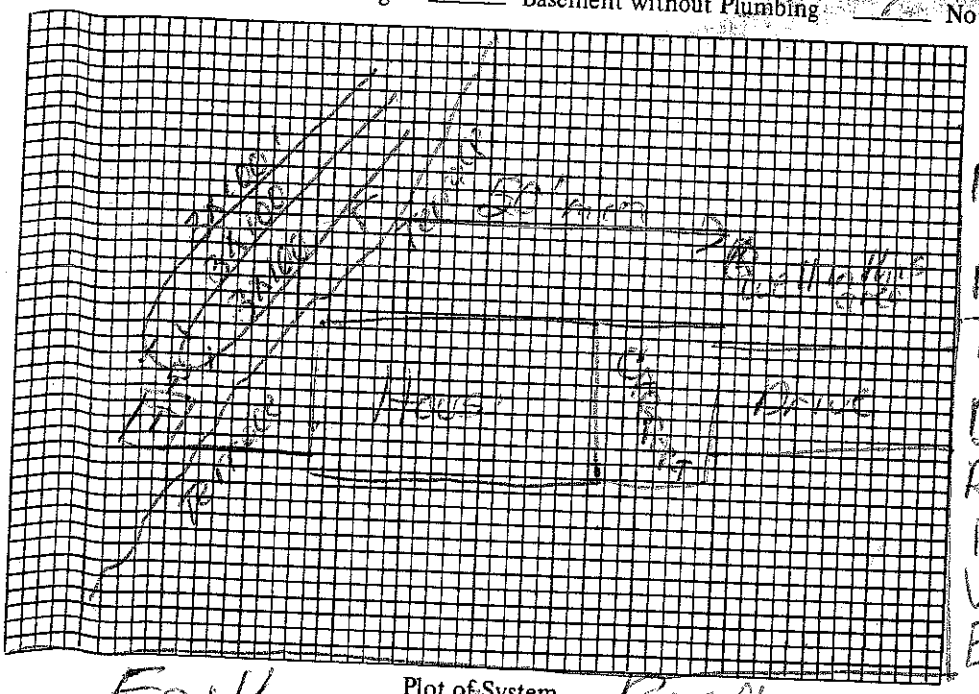
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 2/4 acre +

Character & Porosity of Soil clayloam/cly in septic area
Percolation Rate 0.4 spt/FT
Topography 2-7%
Depth to Water Table 41+ in septic area
Rock or other impervious formations None Noted

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: James A Hegerty

IMPROVEMENTS PERMIT BY Keith Shook RS

COMMENTS: A small strip of good soil exists on the lot directly adjacent to the terrace. System must go in this area. Keep well 50' minimum from septic area.

CERTIFICATE OF COMPLETION BY _____

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