4656063720

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 Tom SAWYER DATE 9-29-83 PERMIT NO. 329

PHONE: Business _____ Home _____

LOCATION Hwy 21 S TR Huntington Woods DRIVE Lot on R

SUBDIVISION NAME Huntington Woods LOT NO. 20+21 SECTION OR BLOCK NO. _____ S. R. No. _____

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

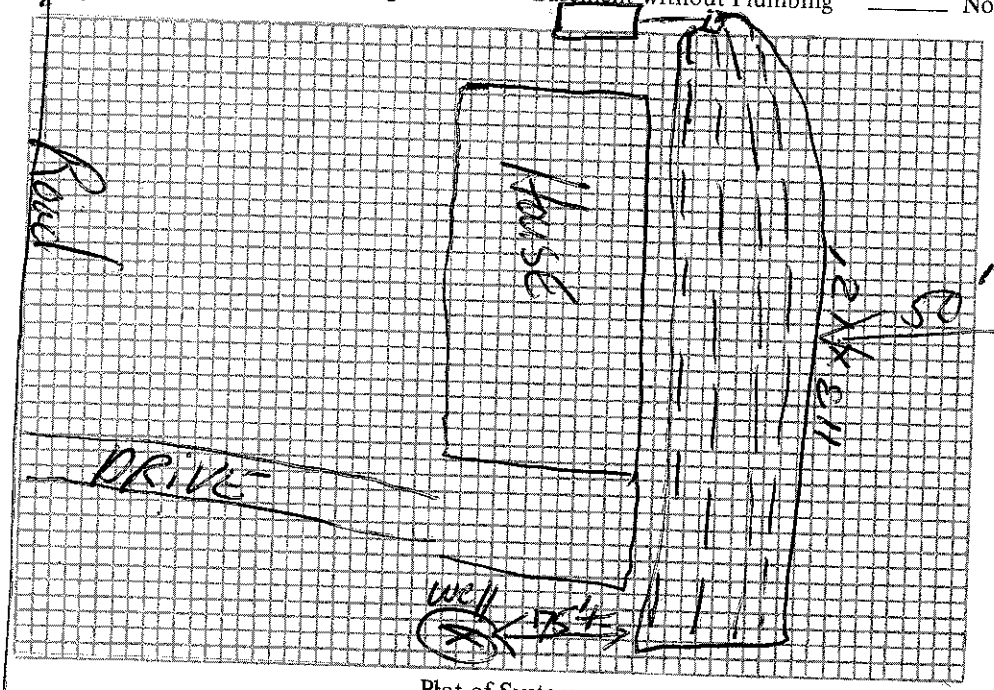
No. Bedrooms 3 No. Bathrooms 2½

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

Lot Area ~40,000 Ft²

Character & Porosity of Soil clay loam - silty p.m.
Percolation Rate 0.4 gpd/ft² 10/5 10/4
Topography Hilly
Depth to Water Table 4'
Rock or other impervious formations None Observed

(X) Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1350 Linear Ft. 450
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )
LAKE

Installed by Wayne Atkinson

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: CHANGE
DIVERT Roof WATER

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 9-29-83

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