IREDELL COUNTY HEALTH DEPARTMENT 4657-36-2355

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

OWNER OR CONTRACTOR Port City Electric Co. DATE 6-24-81 PERMIT NO. 191

PHONE: Business _____ Home _____

LOCATION 21 N. on left beside water treatment plant

S. R. No. _____

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

House ( ) Mobile Home ( ) Business (✓) Other System designed for 50 employees

No. Bedrooms — No. Bathrooms 4

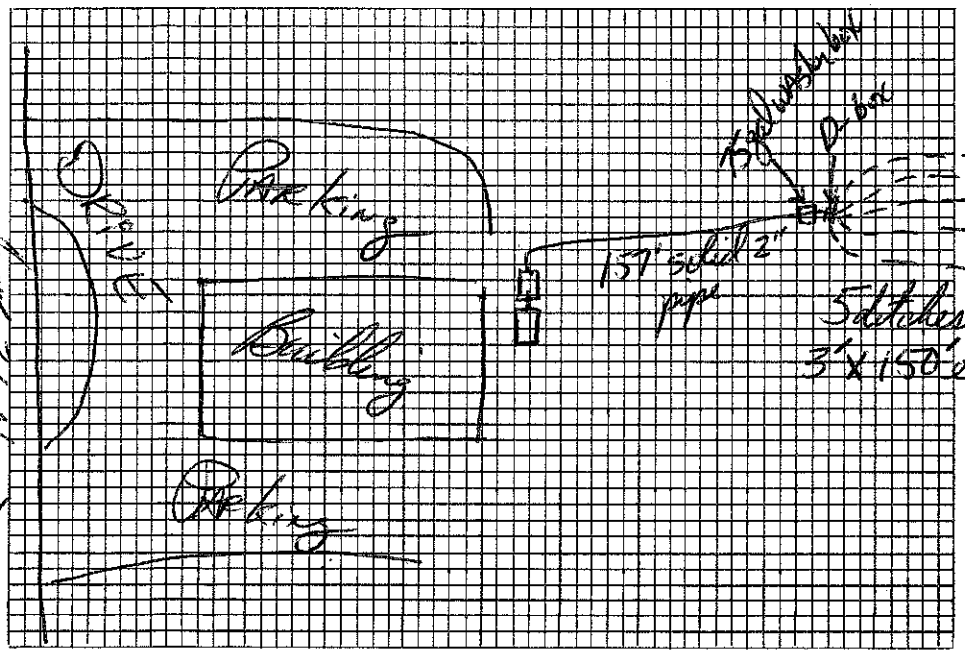
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes ( ) No (✓)
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Clay loam
Percolation Rate 80-120
Topography 4-6%
Depth to Water Table unk.
Rock or other impervious formations none obs.

Lot Area acreage

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

1500 gal. Holding tank w/ pump (½ hp)



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 5
Sq. Ft. 2250 Linear Ft. 750
Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)

Installed by Wayne Osborne

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 David R. Hinson DATE 6-24-81

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