07557 4664298304

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 Gerald Walton DATE March 1, '88 PERMIT NO.

PHONE: Business ____ Home ____

LOCATION 115S. TC 1138 (Presbyterian Rd) on left ~1/4 mile before jct w/ 1125 (Stearn's Chapel Rd) S. R. No.

SUBDIVISION NAME Gold Trace LOT NO. 5 SECTION OR BLOCK 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~~ PS Yes (✓) No ( )

Lot Area 100'x450'

Character & Porosity of Soil clay

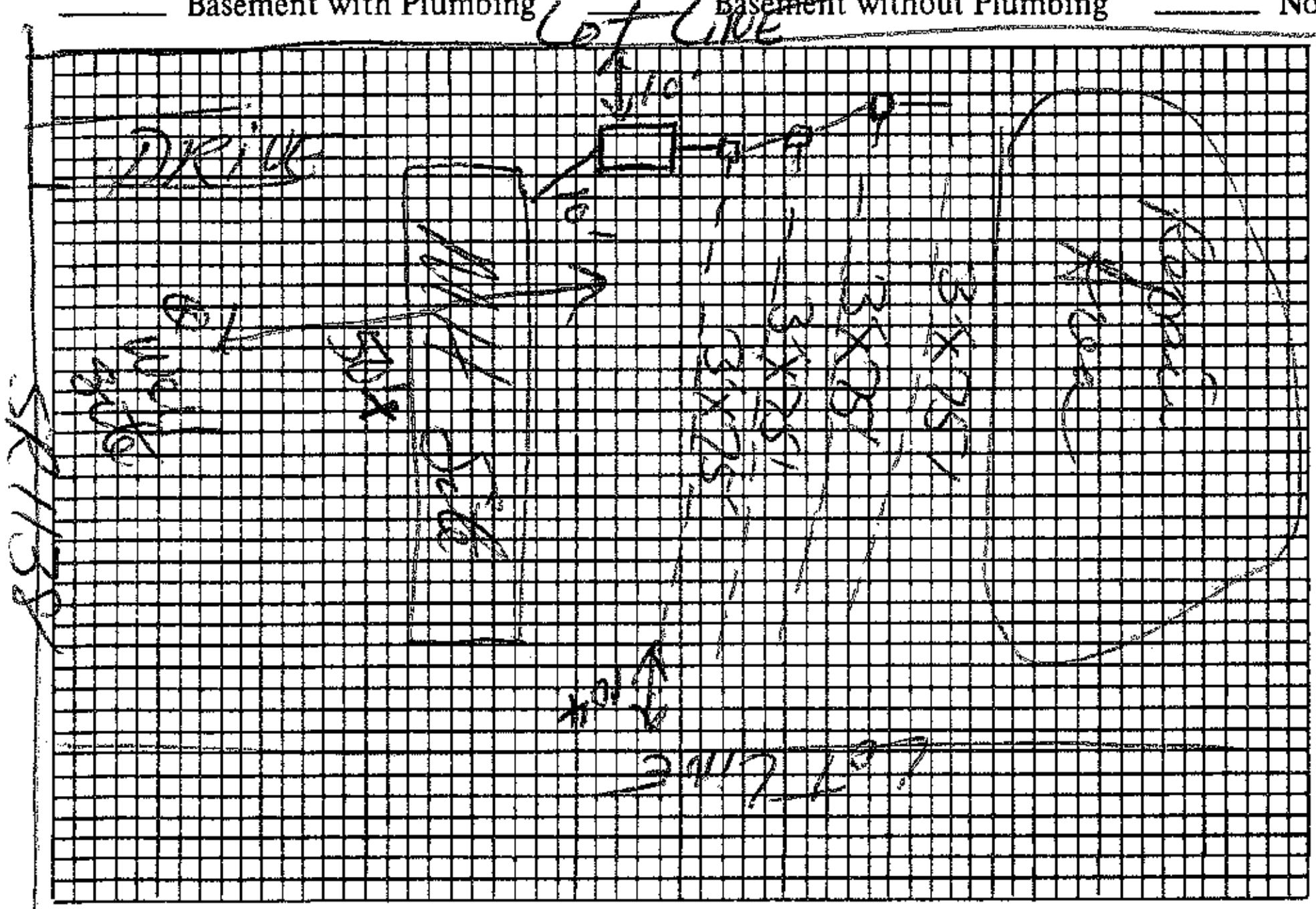
Percolation Rate ~.4

Topography 6-15%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

____ Basement with Plumbing ____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by JR Bowles

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

Signed: ____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: Well not down.

CERTIFICATE OF COMPLETION BY DR Hinson, RS DATE 3-1-88

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