IREDELL COUNTY HEALTH DEPARTMENT 4605218832

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

OWNER OR CONTRACTOR Ricky Stallings DATE 12-4-86 PERMIT NO. 620

PHONE: Business _____ Home _____

LOCATION 1125 S. TR ~ 1/4 mile before get w/ 1142 at end in Cul-D-Sac

SUBDIVISION NAME Wildwood Acres LOT NO. 15 S. R. No. _____ SECTION OR BLOCK NO. _____

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

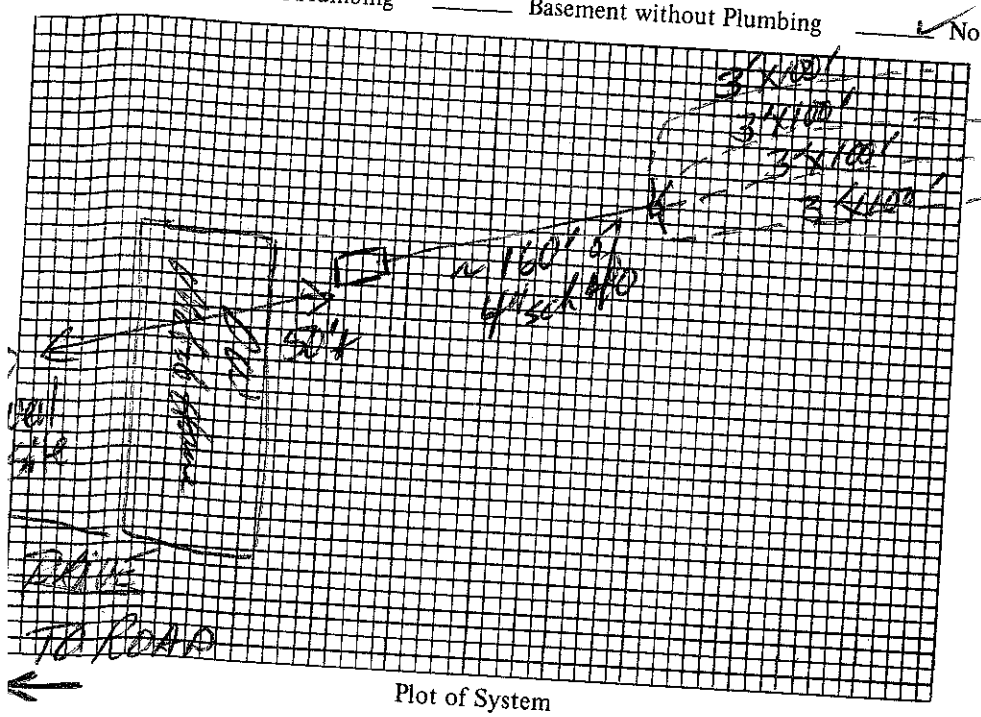
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 2.6 Acres

Character & Porosity of Soil clay
Percolation Rate 13
Topography Flat
Depth to Water Table 34
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. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by J Erwin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well not down

ERTIFICATE OF COMPLETION BY _____

XISTING SYSTEM CHECKED BY: _____ DATE 12-4-86

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

rmit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making
provements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold