Final 2030

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. W. Bradfield DATE 11-20-84 PERMIT NO. 320

PHONE: Business ______ Home ______

LOCATION 1146 S, TR 1142 ½ mile TR [illegible] Carolwoods (before Rocky River) 10th Lot on left S.R. No. ______

SUBDIVISION NAME Carolwoods Road LOT NO. 10 SECTION OR BLOCK NO. ______

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area 20,000 FT²

Character & Porosity of Soil Clay loam

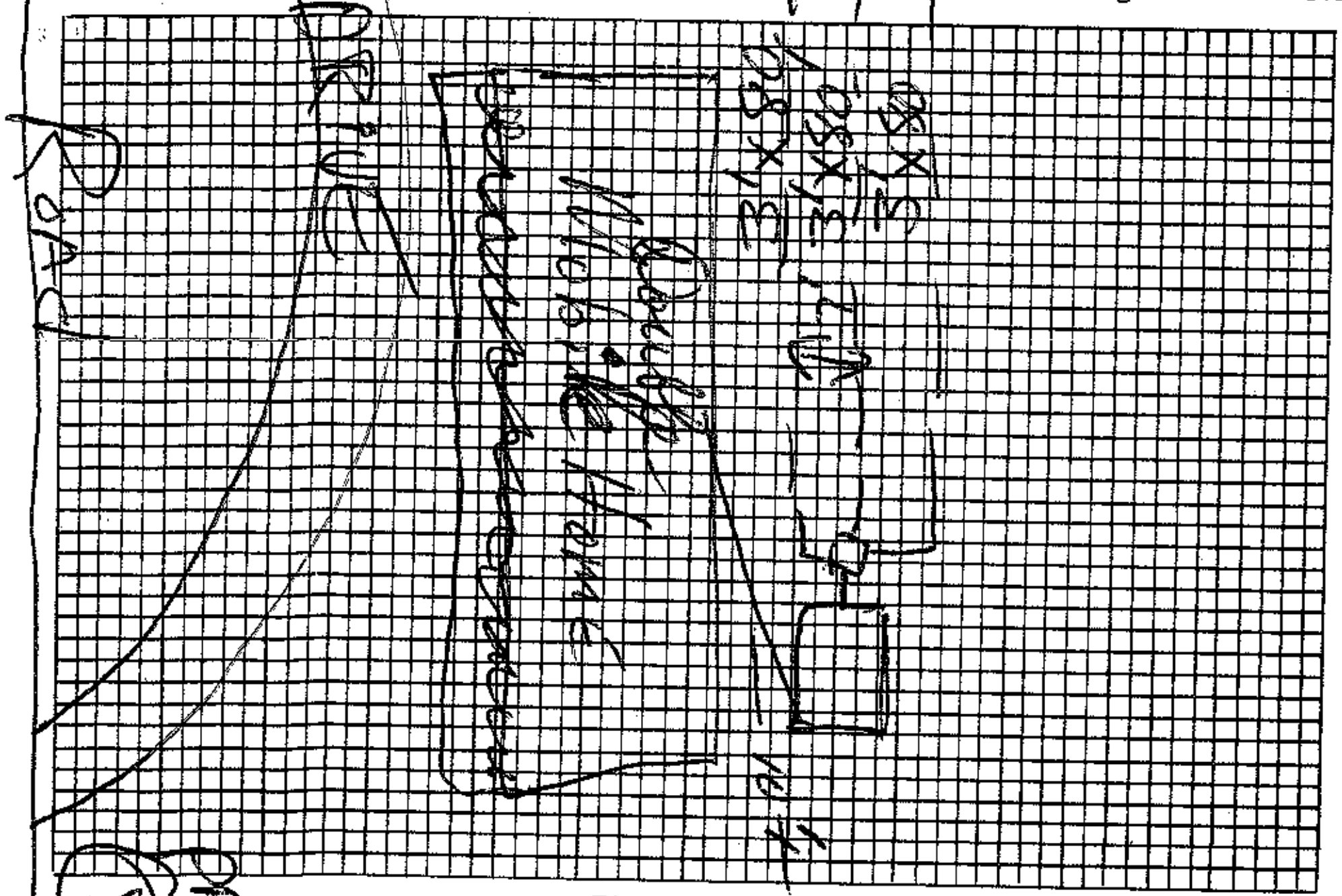
Percolation Rate 0.5 gal/ft²/day

Topography 2-8%

Depth to Water Table [illegible]

Rock or other impervious formations NONE obs.

______ Basement with Plumbing ______ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 120 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (X)

Public ( )

Installed by ______

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

Signed: X J. W. Bradfield

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS Keep System shallow About 1.5' Cover & follow contours

CERTIFICATE OF COMPLETION BY ______ DATE ______

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