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 PBS Realty DATE 4-11-85 PERMIT NO. 143

PHONE: Business _____ Home _____

LOCATION 11465 TR 151 Road ¾ mile on R TR Johnson Dairy Road ½ mile

S. R. No. _____

SUBDIVISION NAME Carolwoods LOT NO. 32 SECTION OR BLOCK NO. _____

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

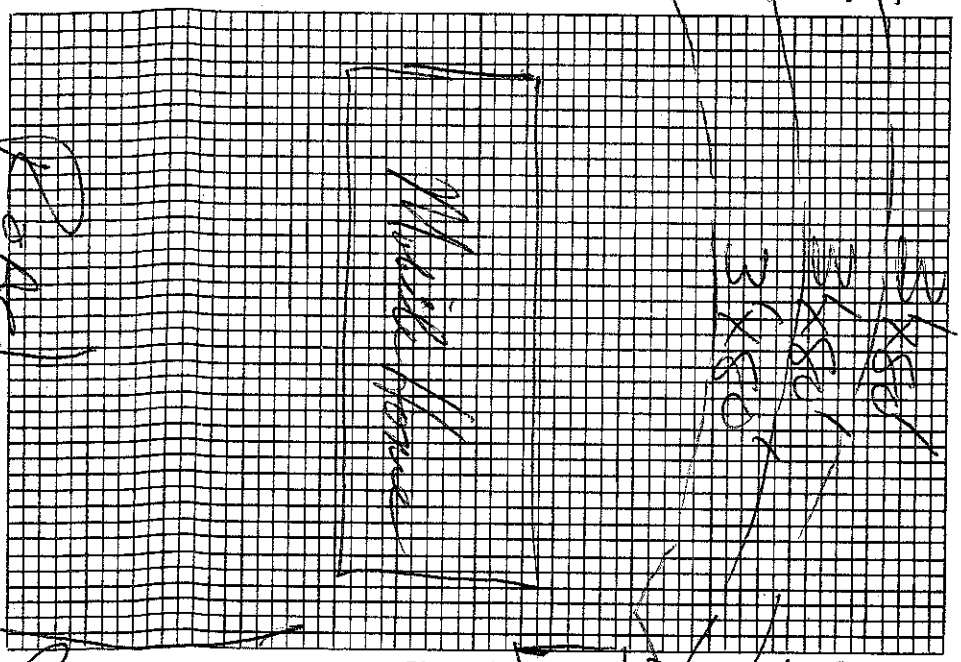
No. Bedrooms 3 No. Bathrooms 2

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 ±

Character & Porosity of Soil Clay
Percolation Rate 0.5 gpm
Topography Slight slope
Depth to Water Table 4 ft
Rock or other impervious formations None obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12

Water Supply: Individual (X)
Public ( )

Installed by K. Dellinger

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

Signed: _____

IMPROVEMENTS PERMIT BY C K Barnett

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Jack Clement DATE 4-11-85

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