# 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 4-2-85 PERMIT NO. 64

PHONE: Business _____ Home _____

LOCATION 1146 Caddle Creek go 5 miles TR on Johnson Dairy Farm Rd, TR on Carolwoods go ½ mile take 1st Right 2nd lot from end S. R. No. _____

SUBDIVISION NAME Carolwoods LOT NO. 31 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±sq

Character & Porosity of Soil Clay

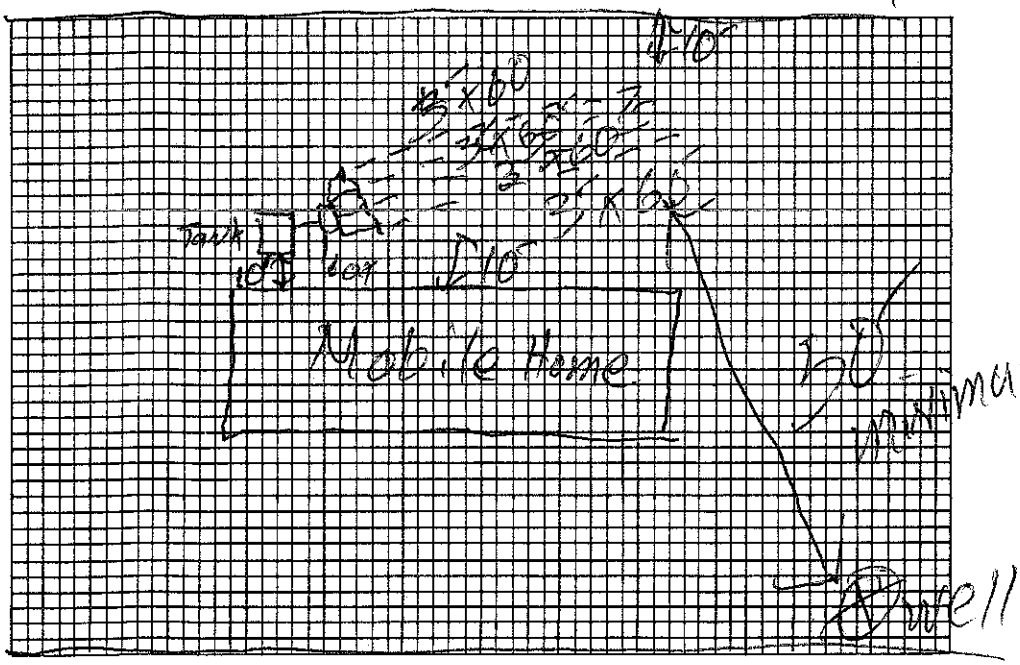
Percolation Rate 0.5 gal/ft²/day

Topography 2-18% 41

Depth to Water Table _____

Rock or other impervious formations None observed

_____ 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. 720 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: S S Brattain

IMPROVEMENTS PERMIT BY _____

COMMENTS: keep system shallow & 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