IREDELL COUNTY HEALTH DEPARTMENT 4e76-36-1942

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

OWNER OR CONTRACTOR Calvin M. Hampton, JR. DATE 12-19-85 PERMIT NO. 531

PHONE: Business _____ Home _____

LOCATION N. Main Street TR Linwood Road TR 1153 (Brumley Road) 2½ mile on R

SUBDIVISION NAME Quail Hill LOT NO. 35 S. R. No. _____ SECTION OR BLOCK NO. _____

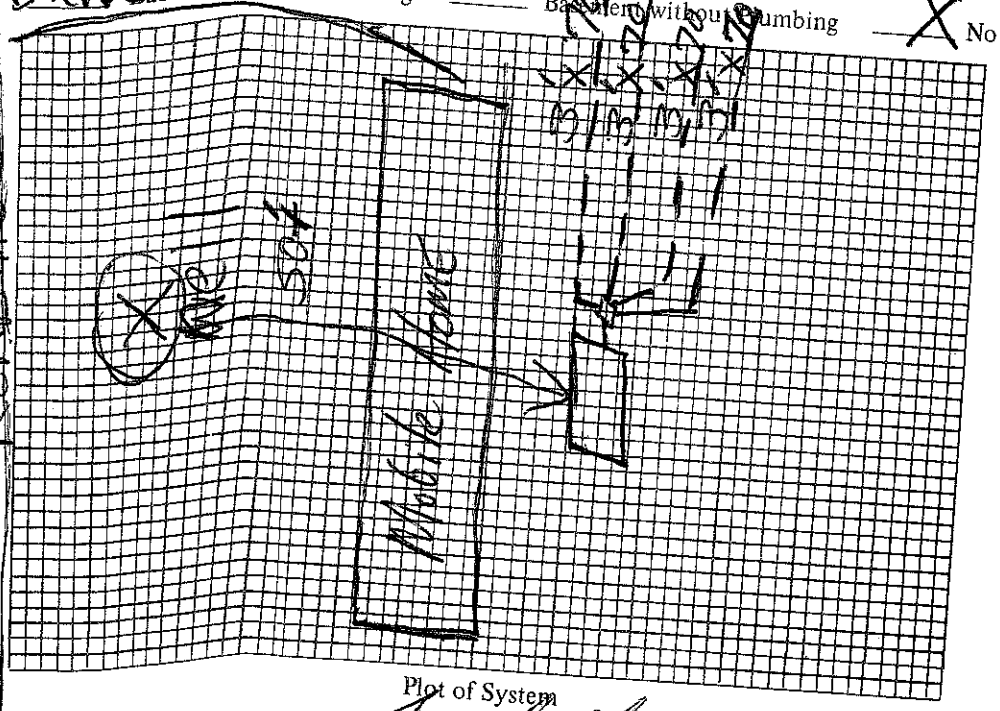
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil Clay w/ sandy loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate 0.4gpm/ft/day
Auto. Wash. Machine	Yes (X)	No ( )	Topography Level
Site Suitable	Yes (X)	No ( )	Depth to Water Table 22 ft 6 in
			Rock or other impervious formations NONE obs.

Lot Area 1.0 ACRE

Basement with Plumbing _____ Basement without Plumbing _____ No Basement (X)



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 840 Linear Ft. 280
Depth of Stone in Lines 12 in

Water Supply: Individual (X)
Public ( )
Lincolnton

Installed by Roy Heafner

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer

EXISTING SYSTEM CHECKED BY: _____ DATE 12-19-85

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