4676-45-2759

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, Inc. DATE 6/10/88 PERMIT NO.

PHONE: Business Home 525-4848 - 788-7039

LOCATION Linwood Rd. S. T.L. Brumley Rd. TR Quail Hill TR at Roads End. On left S. R. No.

SUBDIVISION NAME Quail Hill LOT NO. 57 SECTION OR BLOCK NO.

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

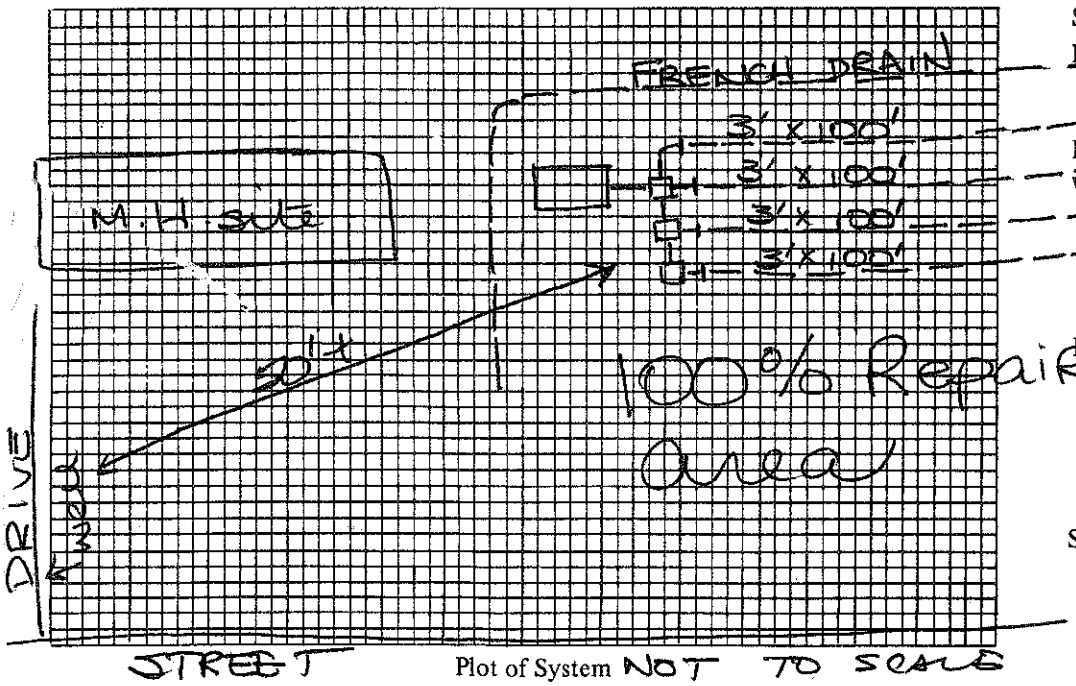
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Clayey ↑ing to P.M.
Percolation Rate 4.3
Topography 6070
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 20000 ⇒ 1 ACRE

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System NOT TO SCALE

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 Dellinger Septic.

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS:

CERTIFICATE OF COMPLETION BY Andrea C. Price DATE 6/10/88

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