4676-45-7581

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 JACK KAUFMAN DATE 9/13/88 PERMIT NO. 22 A

PHONE: Business _____ Home 872-1018

LOCATION LINWOOD RD. S. TL BRUMLEY TR QUAIL HILL TR OAK BROOK ON L. S. R. No. _____

SUBDIVISION NAME QUAIL HILL LOT NO. 59 SECTION OR BLOCK NO. _____

TAX #: 1H-12-A-59 (Coddle Cr)

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

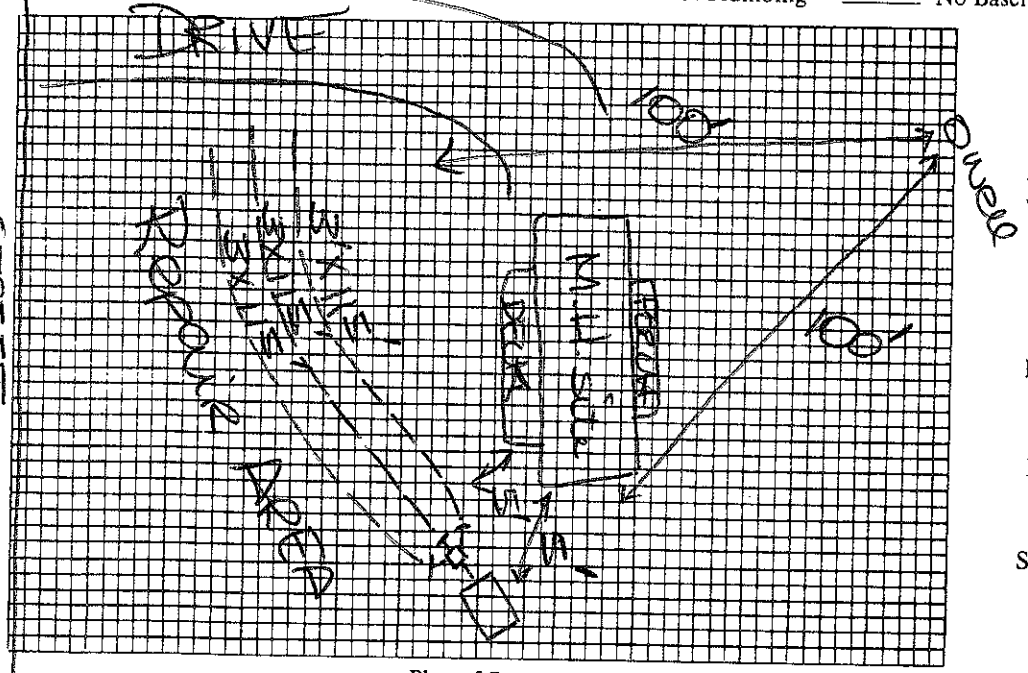
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Clayey
Percolation Rate 35
Topography 490
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 2 1/2 Acre

~~Basement with Plumbing~~ _____ Basement without Plumbing _____ No Basement ✓



Plot of System NTS.

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Dellinger Septic Tank Co.
I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY ACO.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew C. Prince DATE 9/13/88

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