06691 IREDELL COUNTY HEALTH DEPARTMENT 4676-55-3170

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Kris Sloop DATE Mar 14 '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1150 (Ferrwood Rd.) TL 1153 (Brumley Rd.) TR 1st entrance into Quail Hill TR at Stop Sign at end on Rt. S. R. No. _____

SUBDIVISION NAME Quail Hill LOT NO. 64 SECTION OR BLOCK NO. _____

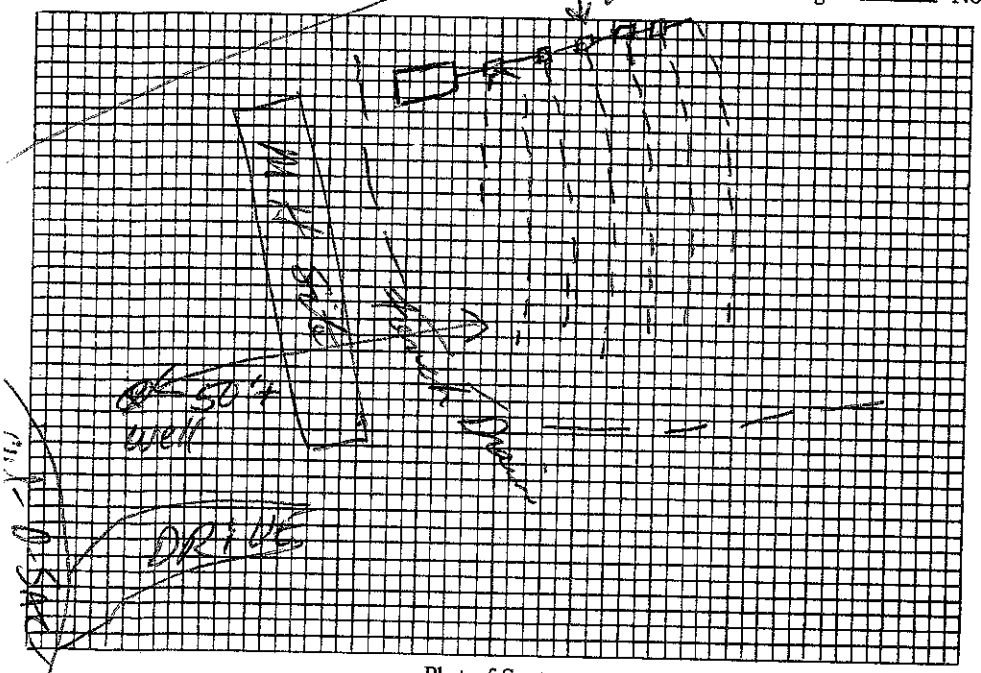
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site ~~Suitable~~ PS Yes (✓) No ( )
Lot Area .625 AC

Character & Porosity of Soil clay
Percolation Rate 43
Topography 2-6%
Depth to Water Table 34
Rock or other impervious formations none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 7
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by J R Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY M Hanson /RS DATE Mar 14 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

06691

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 Kris Sloop DATE Feb 4, '88 PERMIT NO.

PHONE: Business Home

LOCATION 1150 Greenwood Road TR 1153 (Brumley Rd) TR 1st entrance into Quail Hill TR at Stop Sign at end on Rt S. R. No.

SUBDIVISION NAME Quail Hill LOT NO. 64 SECTION OR BLOCK NO.

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

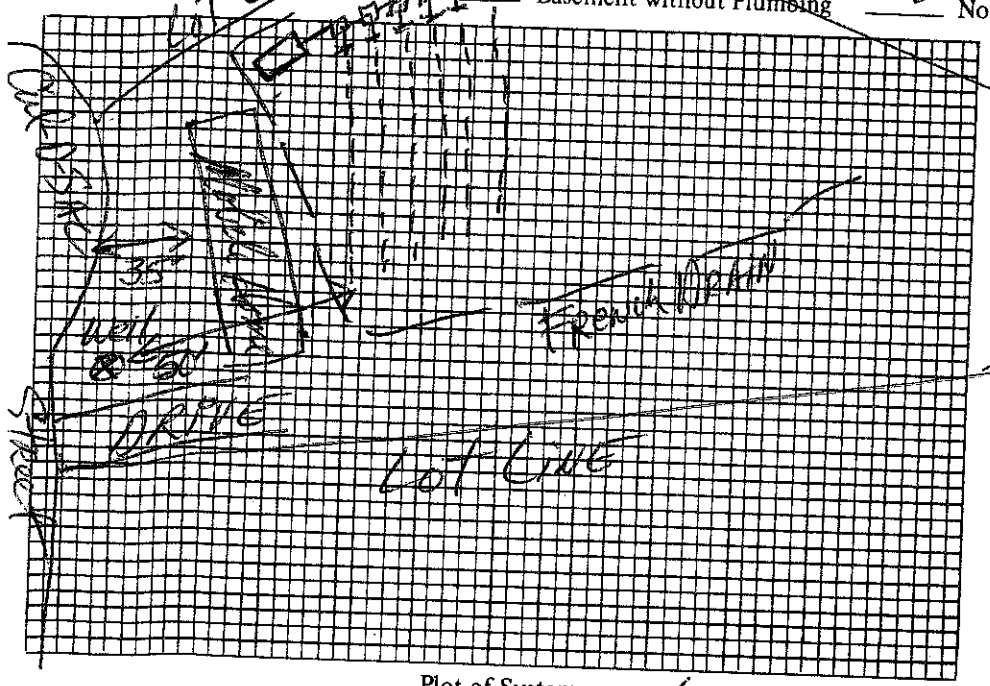
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1.25 Ac.

Character & Porosity of Soil clay
Percolation Rate 2, 3
Topography 2-6%
Depth to Water Table 3'
Rock or other impervious formations none obs.

___ Basement with Plumbing ___ Basement without Plumbing ✓ No Basement with "French" Drain



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 6-8
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by

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

Signed: Kris Sloop

IMPROVEMENTS PERMIT BY David R. Hinson, R.S.

COMMENTS: Drainfield must be installed absolutely no deeper than 24" to bottom of ditch and on contour. Use drop boxes or flow dividers to distribute effluent. French Drain to be installed around system and discharged to back of property.

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