IREDELL COUNTY HEALTH DEPARTMENT 4677393422

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

OWNER OR CONTRACTOR John Templeton DATE 3-26-99 PERMIT NO. 52

PHONE: Business _____ Home 463-3094

LOCATION 15a East Th on Higgins TR on Woodland Heights S. R. No. _____

SUBDIVISION NAME Woodland Heights LOT NO. 9 SECTION OR BLOCK NO. _____

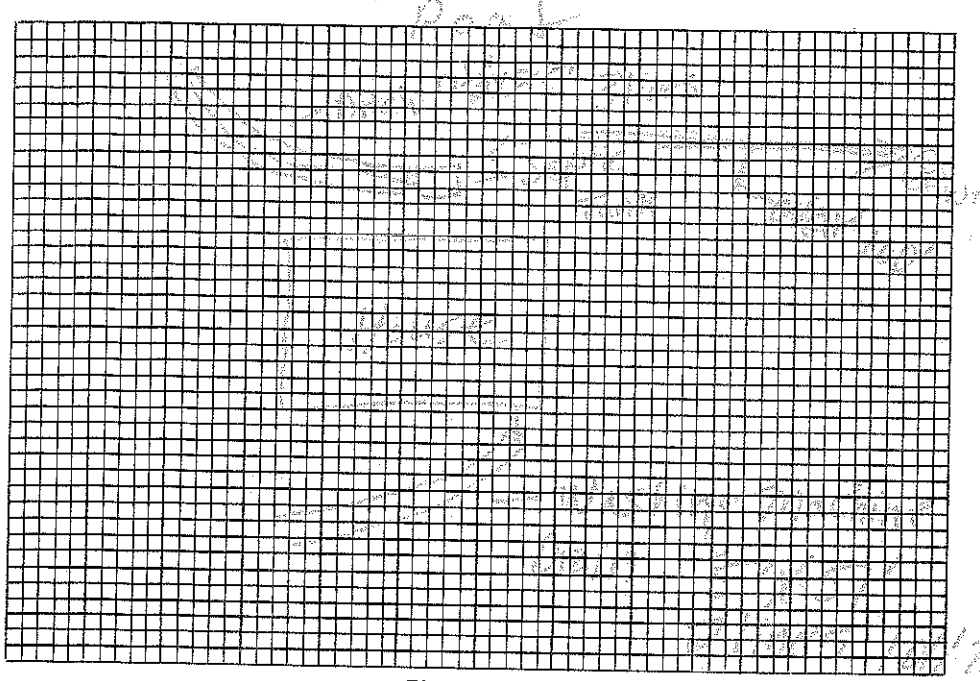
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 13,000 Sq Feet

Character & Porosity of Soil Sandy Clay loam / Porosity Fair to poor
Percolation Rate 20 to 40 minutes
Topography Rise to Low slope
Depth to Water Table 10'
Rock or other impervious formations Stone to Bedrock



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )
Well next door

Installed by E. T. Ervin

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John C. Moore DATE 3-26-99

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold