#679-11-8635

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 Harold Cline DATE 2-22-80 PERMIT NO. 30

PHONE: Business _____ Home _____

LOCATION 901 N Tl on 2362 2nd house on left

S. R. No. _____

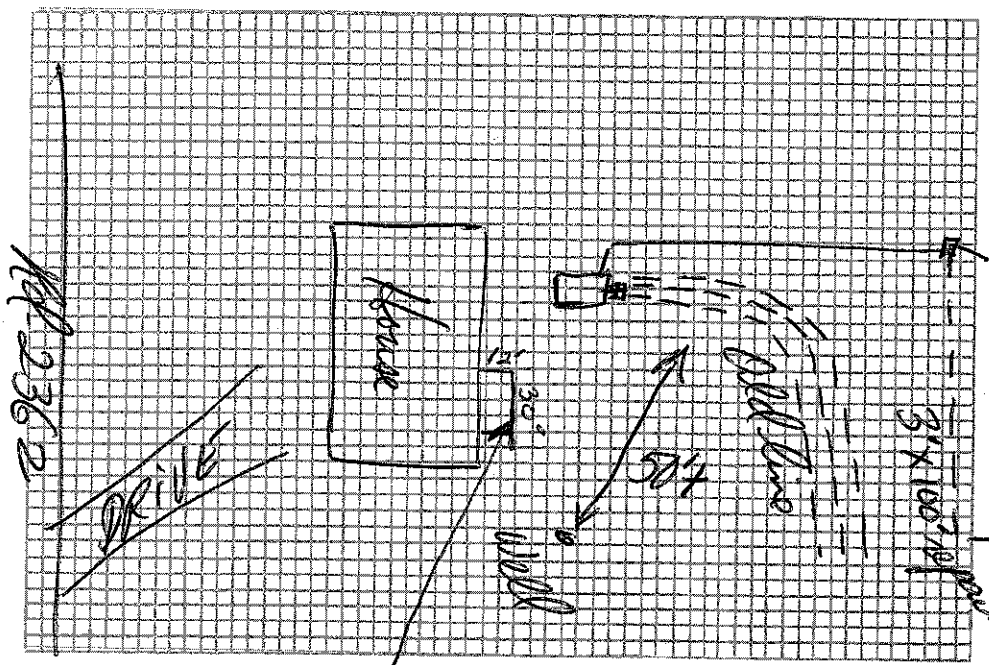
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	30 mpi	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	G-SR	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	unk.	
			Rock or other impervious formations	none obs.	

Lot Area acreage



Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Wayne Dobson

12'x24' Roof over existing patio

Plot of System

IMPROVEMENTS PERMIT BY [signature] 8-6-10

COMMENTS: _____

The proposed / existing Roof over existing patio addition does not appear to impact the existing septic system.
**NOTE: _____

[signature] REHS
Date: 8-6-2010
ICHD-Environmental Health Division

CERTIFICATE OF COMPLETION BY Harold R. Hinson DATE 2-22-80

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