11049.

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 74 PROPERTIES, INC. DATE 2-27-91 PERMIT NO. 8H-4-B-32.

PHONE: Business _____ Home _____

LOCATION Hwy 70W. - 2 miles past Little Oaks - T.L. into dev. - bear @ forks. go to end - T.L. up hill on left. S. R. No. _____

SUBDIVISION NAME WINDFOREST DEV. SEC III LOT NO. 32. SECTION OR BLOCK NO. _____

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

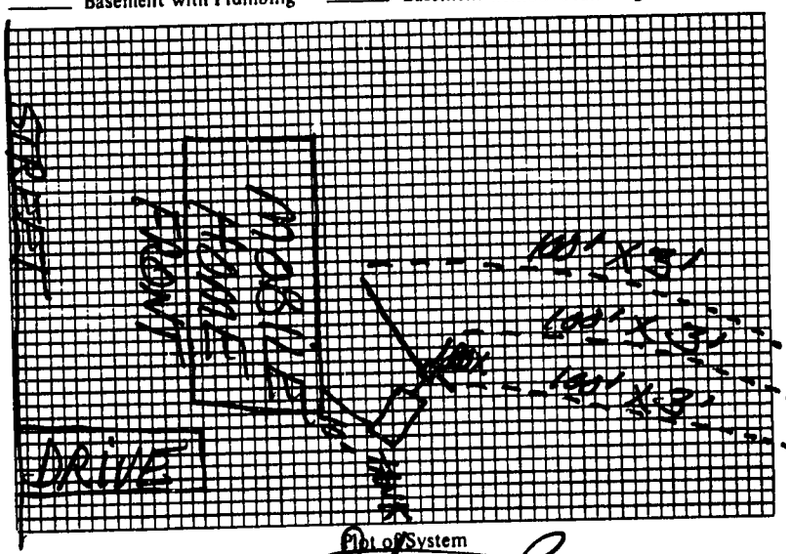
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Prev. Suitable.
Percolation Rate _____ min./in. ft.
Topography 6-10%
Depth to Water Table 10+
Rock or other impervious formations surface rock.

Lot Area 1.1784 acres.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 18"

Water Supply: Individual (✓)
Public ( )

Installed by Dellinger Grading

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Keep well at least 50' from S.T. system.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 2-27-91.

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