1016.

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 CHARLES C. DAVIS DATE 3-21-90. PERMIT NO. 8H-4-A-20.

PHONE: Business _____ Home _____

LOCATION Hwy 90W-2 miles past White Oaks-T.L. into dev.-4th lot on left. S. R. No. _____

SUBDIVISION NAME WINDCREST DEV. LOT NO. 20 SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other May install larger later.

No. Bedrooms 3 No. Bathrooms 2 Character & Porosity of Soil Sandy Loam Suitable.

Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate 6-10 Min/Inch

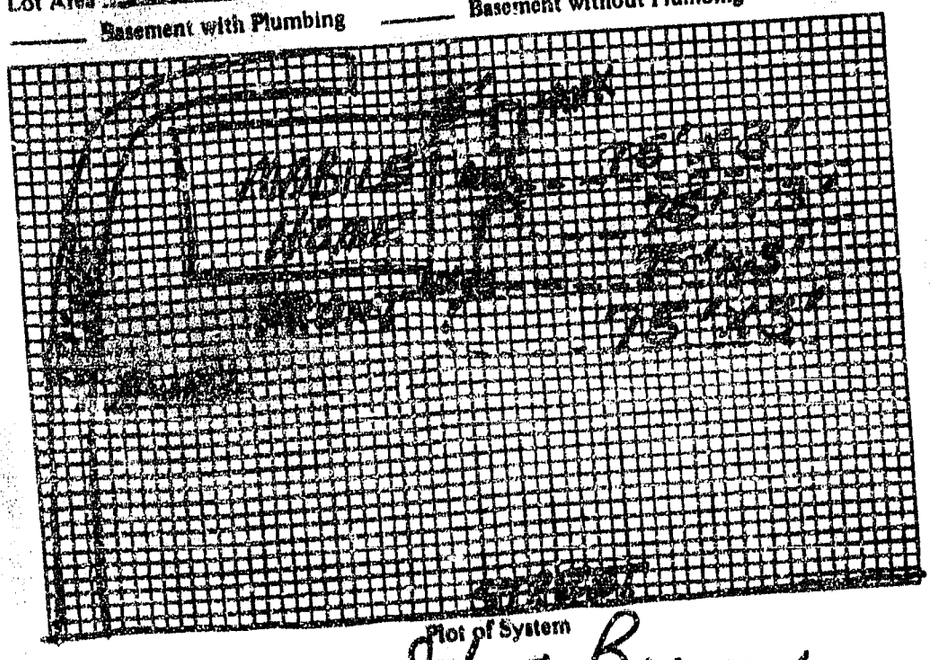
Auto. Dishwasher Yes ( ) No (✓) Topography 6-10% Lot

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 10'+

Site Suitable Yes Yes (✓) No ( ) Rock or other impervious formations Surface rock.

Lot Area 2 acres

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 400 Linear Ft. 300

Depth of Stone in Lines 24"

Water Supply: Individual (✓)
Public ( )

Plot of System

Installed by Dobbins Grading

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 3-21-90.

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