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 HORNE BUILDERS DATE 6-9-81 PERMIT NO. _____

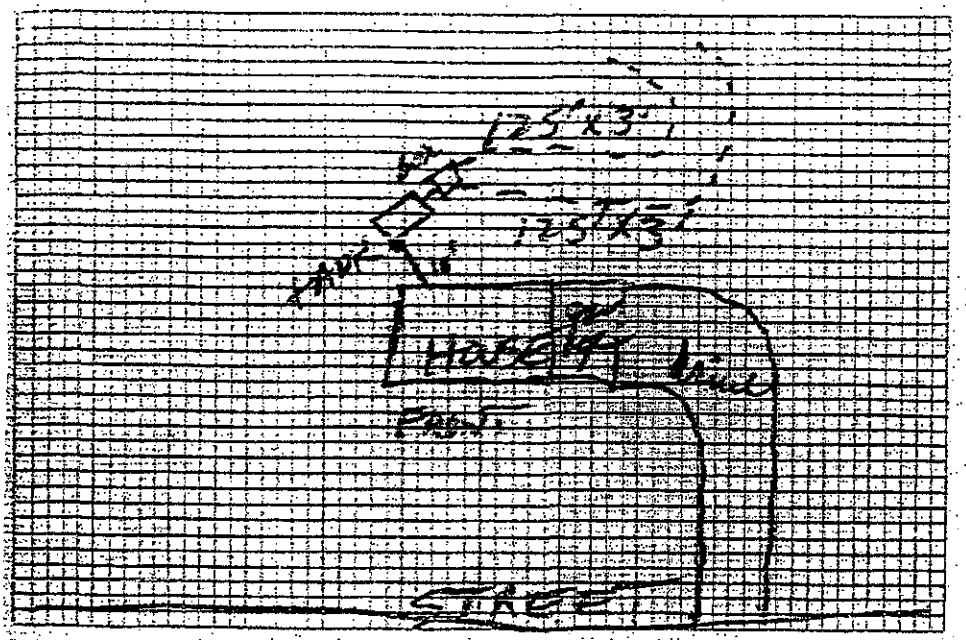
PHONE: Bus. _____ Home _____

LOCATION 64-70 west to white Oak, T.L. on Old Mtx. Rd., go 1/2 to 1st hardtop on left, 1/4 mile on left. BK 335 PG 522 LOT NO. _____ SUBDIVISION NAME _____ SECTION OR BLOCK NO. _____ S. R. N. 1529

House ✓ Mobile Home _____ Business _____ Other _____

No. Bedrooms 3 No. Baths 2 ✓ Characteristics & Porosity of Soil Sandy clay loam
Garbage Disposal Unit Yes _____ No _____ ✓ Percolation Rate 6 min/sq. ft.
Water Softener Yes ✓ No _____ Topography 2-10% Cut
Automatic Washer Machine Yes ✓ No _____ Depth to Water Table 12+
Site Suitable Yes ✓ No _____ Rock or other impervious formations Not observed
Lot Area 30,000 sq. ft.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gal.
Nitrification Field 2
No. of Lines
Sq. Ft. 150 Linear Ft. 250
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public ( ✓ )

Installed by Wilbert Collector

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Landscape/cover S.T. system for drainage purposes. Pipe of downspouts from gutters away from S.T. system.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 6-9-81

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