03448

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 CLYDE HALL ENTERPRISES DATE 4-21-88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION: 4 mile S. Rd. north of Bradford Xing approx. one mile. T.R. into dev. lot on Rt 100 yards from the end. S. R. No. _____

SUBDIVISION NAME HALLMARK ESTATES. LOT NO. 12 SECTION OR BLOCK NO. _____

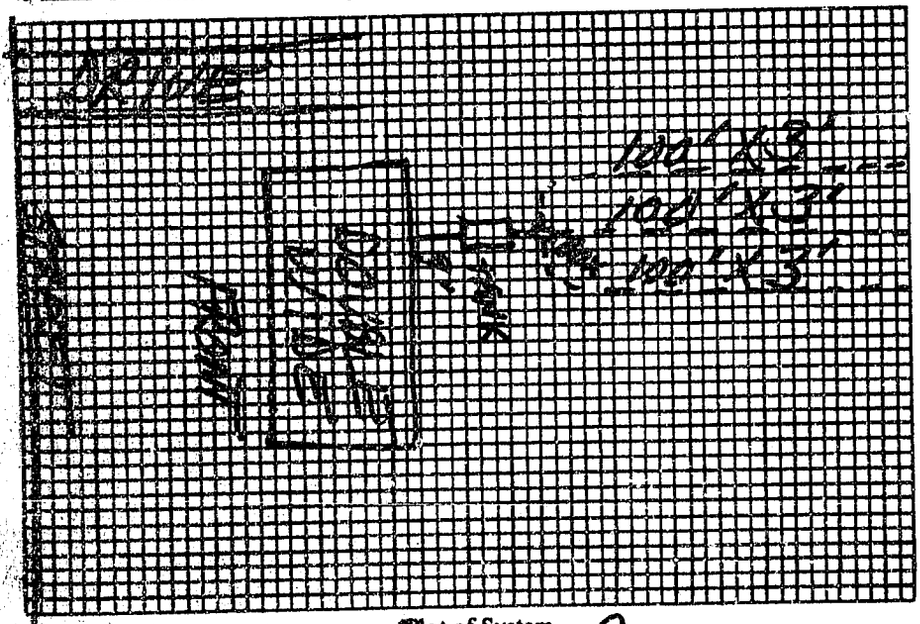
DOUBLEWIDE

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

No. Bedrooms 3	No. Bathrooms 2		Character & Porosity of Soil Perc Suitable.
Garbage Disposal Unit	Yes ( )	No (✓)	Percolation Rate 1 gal./sq. ft.
Auto. Dishwasher	Yes ( )	No (✓)	Topography Level
Auto. Wash. Machine	Yes (✓)	No ( )	Depth to Water Table 18"
Site Suitable	Yes (✓)	No ( )	Rock or other impervious formations None observed.

Lot Area 27,000 sq. ft.

___ 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 12"

Water Supply: Individual ( )
Public (✓)
Rowan Septic Tank Co.

Installed by George Kirkpatrick

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 4-21-88.

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