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 Rick Dyson DATE 8/10/77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Spring Shores Sub. Division off of Sam Ostwalt Rd #1332 S. R. No. _____

SUBDIVISION NAME Spring Shores LOT NO. 110 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 20,000 Sq ft +

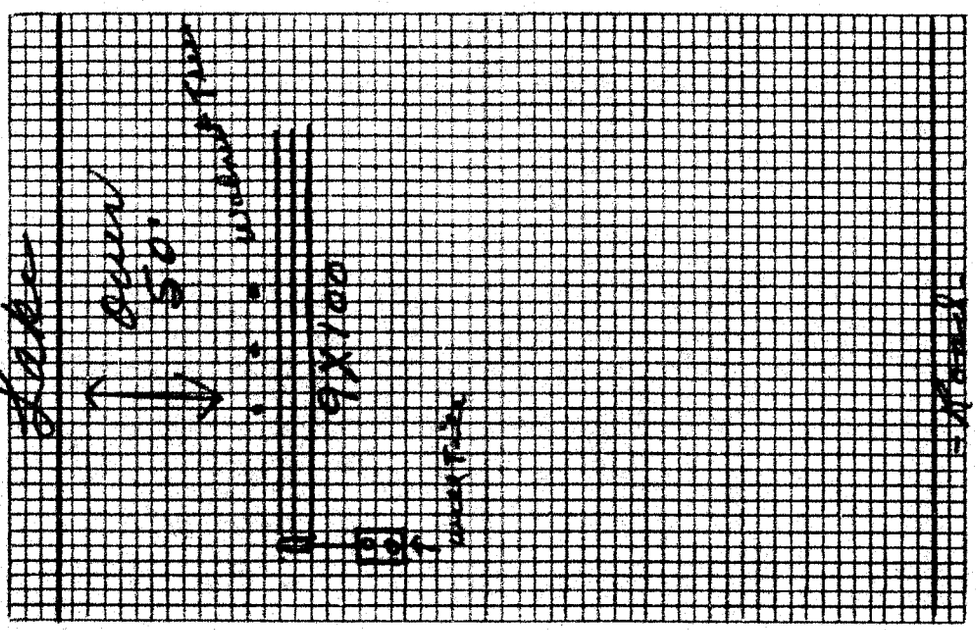
Character & Porosity of Soil Cecil Clay

Percolation Rate _____

Topography Slope to Lake

Depth to Water Table Low

Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by Hoke Septic Tank Co.

½ well tile put over Clean out hole at back of tank

IMPROVEMENTS PERMIT BY _____

COMMENTS: House not started at time of septic tank installation. Surface water should be diverted away from septic tank & lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 8/10/77

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