05730

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 SLAUGHTER BUILDERS DATE 6-11-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Enter Heronwood Dev. - lot on backside near entrance (r)

S. R. No. _____

SUBDIVISION NAME HERONWOOD DEV. LOT NO. 6 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3.5

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

Lot Area Ample

Character & Porosity of Soil Prev. Suitable.

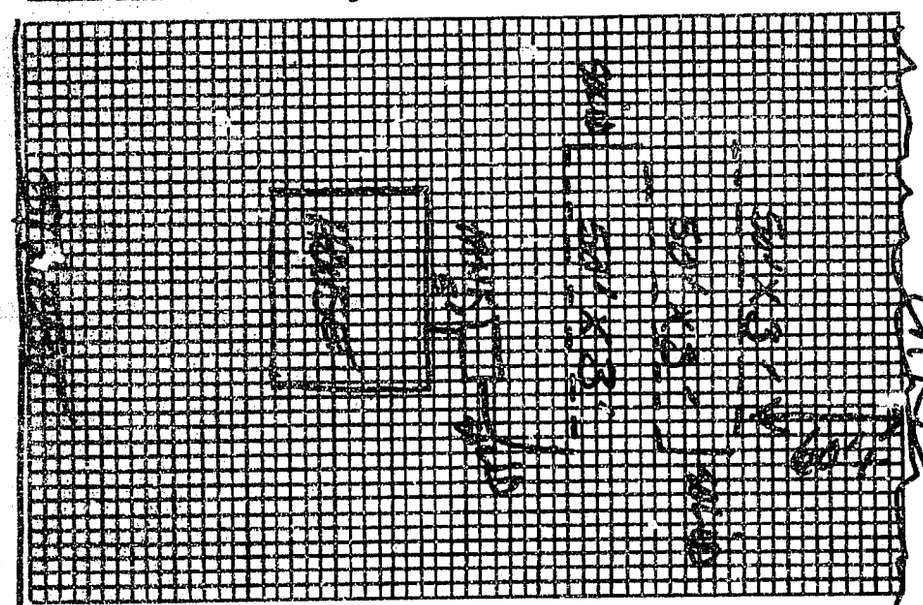
Percolation Rate 5 min/in. ft.

Topography 15-20% S.F.

Depth to Water Table 10'+

Rock or other impervious formations none observed.

(✓) Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 300 Linear Ft. 150
Depth of Stone in Lines 12" 5.0 ft.

Water Supply: Individual ( )
Public (✓)

16" T+T Panel System installed.

Installed by Julian Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sleeks R.S.

COMMENTS: 16" T+T Panel System.

CERTIFICATE OF COMPLETION BY Dave Braun DATE 6-11-87

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