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 Lewis Pierce DATE 07-01-83 PERMIT NO. _____

PHONE: Business Hwy 90 W Home _____

LOCATION Hwy 90 W to Island Ford Rd, go Woodbridge Rd, TR, mobile home 3/4 mile on left (in curve) S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 2

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

Character & Porosity of Soil Prov Suitable : Class III

Percolation Rate 0.5 gal/ft²/day

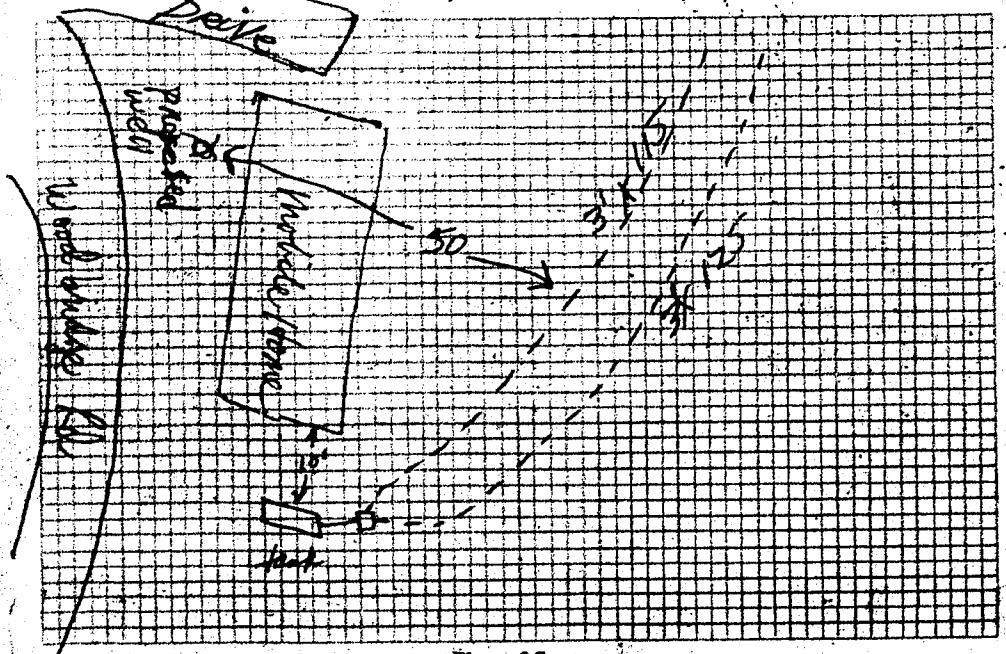
Topography 2-6% slope

Depth to Water Table 10+

Rock or other impervious formations none

Lot Area ample

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by James Hartness

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Landscape over lines to prevent water from standing on line. Keep well 50' from all parts of septic tank system.

CERTIFICATE OF COMPLETION BY Jerry L Pierce DATE 07-01-83

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