IREDELL COUNTY HEALTH DEPARTMENT

11717

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR HAMS GROVE FELLOWSHIP HALL DATE 12/12/90 PERMIT NO. 14G-A-4

PHONE: Business _____ Home _____

LOCATION NC 115 N, TR ON HAMS GROVE RD, ~1.5 MI. ON (L)

_____ S. R. No. _____

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

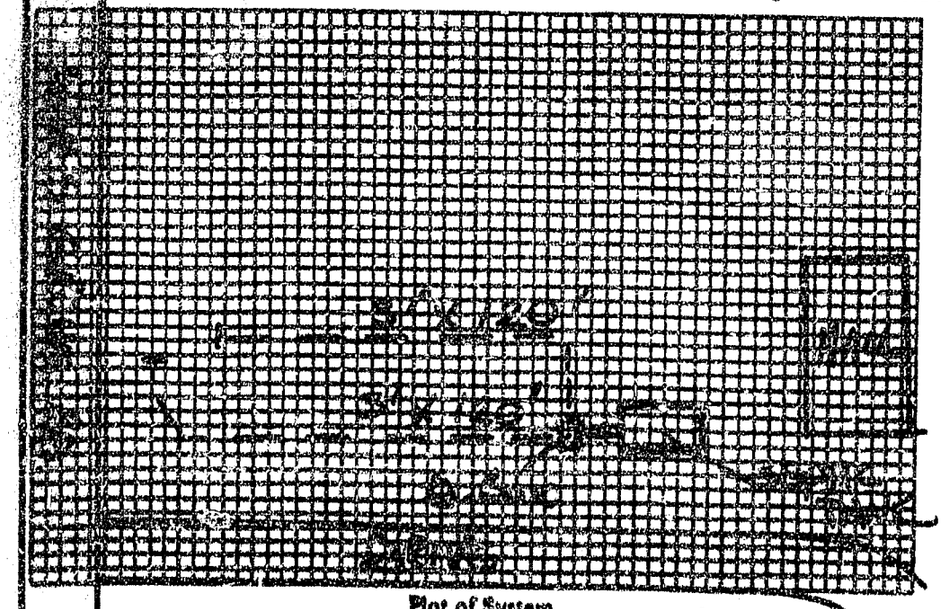
House ( ) Mobile Home ( ) Business ( ) Other ✓ CHURCH FELLOWSHIP HALL

No. Bedrooms X No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes ( ) No (✓)
Site Suitable Yes (✓) No ( )
Lot Area 3.98 Ac

Character & Porosity of Soil PS
Percolation Rate .4 GPD / FT²
Topography 2-6%
Depth to Water Table 10'+
Rock or other impervious formations NONE

TP 8/2/90

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by TOM HARTNESS

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEDRICK STEVE BROWN

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE _____

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