4730 72 7067

II

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 Pete Williams DATE 10-23-95 PERMIT NO. 225

PHONE: Business _____ Home _____

LOCATION 4302 Forth Rd N. T.L. before Shoppers Parking Lot House on right lot S. R. No. _____

SUBDIVISION NAME Shady Cove LOT NO. 3 SECTION OR BLOCK NO. _____

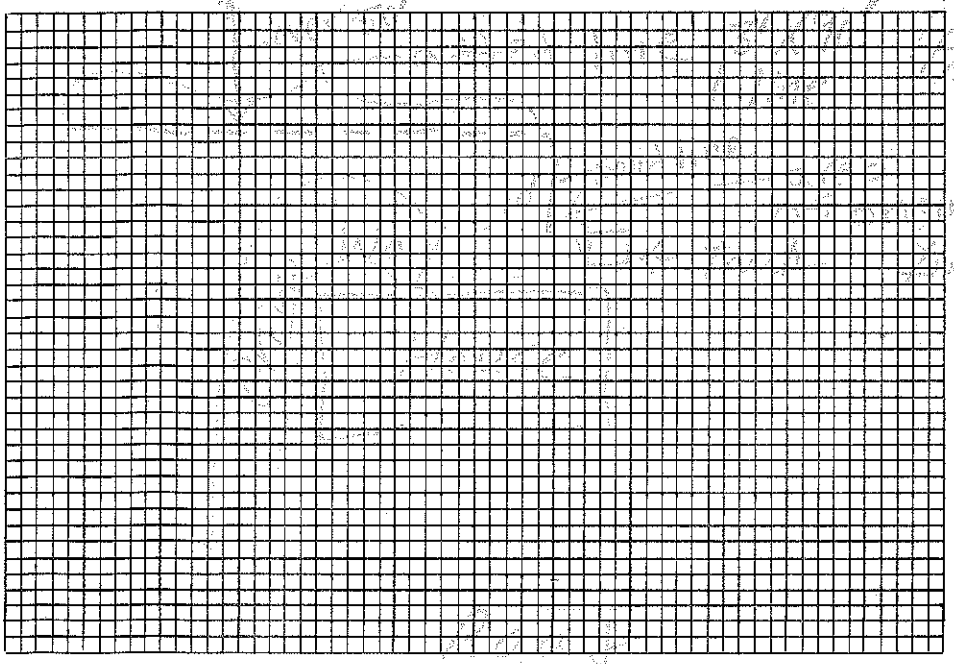
House ( ) Mobile Home ( ) Business ( ) Other Replace

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 15 acres

Character & Porosity of Soil Fill Material (Porosity Fair to Poor)
Percolation Rate Soil texture Clay loam
Topography Level with slight fall
Depth to Water Table 12+
Rock or other impervious formations none



Plot of System

Size of Tank 500 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 320 Linear Ft. 90
Depth of Stone in Lines 24
Water Supply: Individual (✓)
Public ( )

Has driveway over it

Installed by Henry Stroud

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 10-23-95

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