1702.

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 CHARLES HEDRICK DATE 12-27-89 PERMIT NO. IRL-A-11.

PHONE: Business _____ Home _____

LOCATION Perrins Rd. Off Hwy 21 approx. 2.5-3 miles - Turn Right on Rt - ½ mi. to Table creek Rd.

S. R. No. _____

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

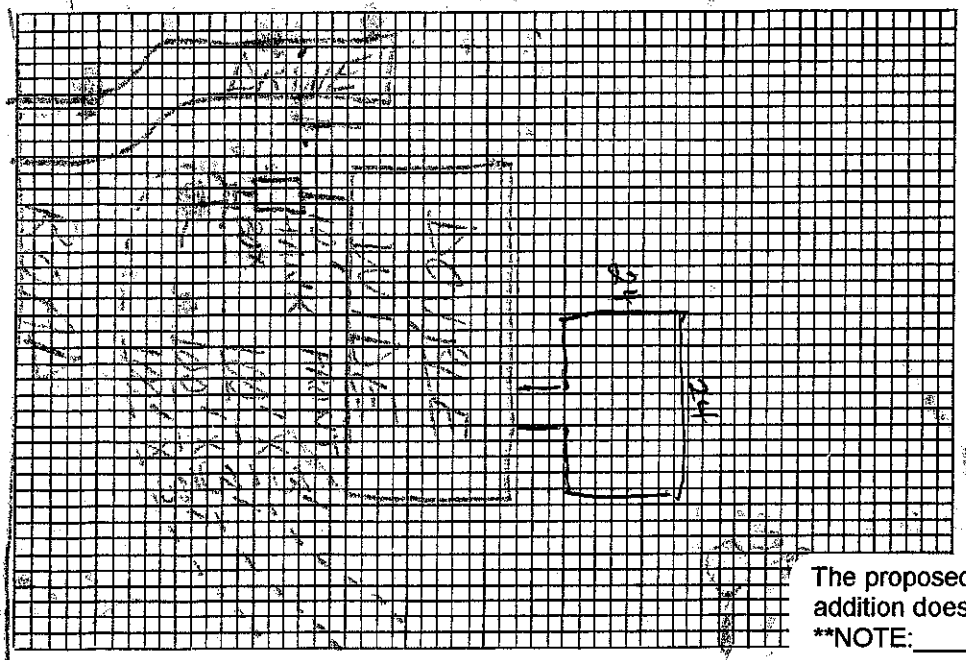
DOUBLEWIDE

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

No. Bedrooms 3	No. Bathrooms 2	Character & Porosity of Soil	Prod. Suitable.
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	Good, Avg. ft.
Auto. Dishwasher	Yes ( ) No (✓)	Topography	2-6%
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	10' +
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	none observed

Lot Area 20,000 sq. ft.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Dennis Hallifax

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

Signed: _____

The proposed / existing family room addition does not appear to impact the existing septic system.

**NOTE: _____ R.S.

Date: 1 December 89
ICHD-Environmental Health Division

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 12-27-89

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