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 WAYNE PAL KENNETH HALL DATE 12-16-24 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 701 Rt on Rd #2318 (Shiloh Ch. Rd) Rt. into Homestead Estates S. R. No. _____

SUBDIVISION NAME ~~Home Stead Estates~~ LOT NO. 4 & 5 SECTION OR BLOCK NO. _____

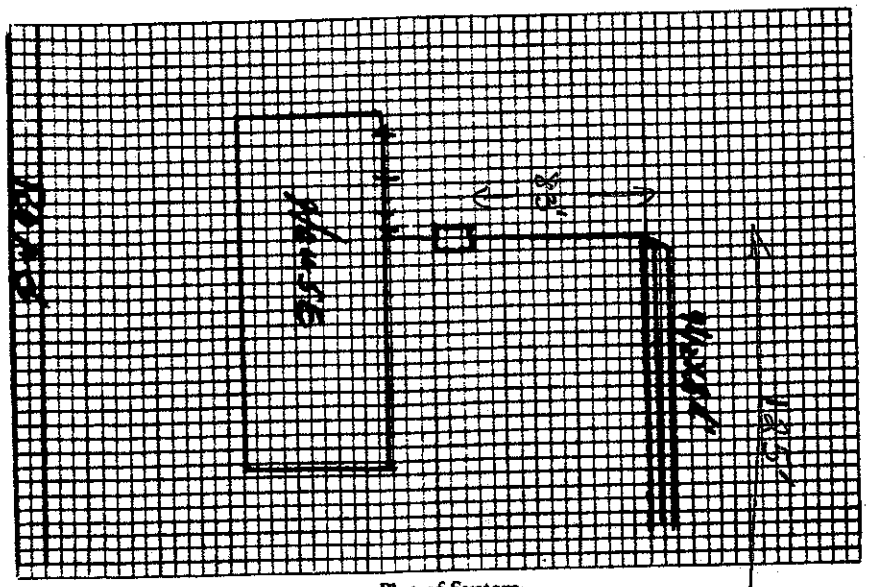
House (✓) Mobile Home ( ) Business ( ) Other _____

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 1 Acre

Character & Porosity of Soil Gray Red Clay
Percolation Rate _____
Topography Slopes to back
Depth to Water Table _____
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 5
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Eldon Yount

IMPROVEMENTS PERMIT BY _____

COMMENTS: 8' 12' Prop. Bldg. KH

CERTIFICATE OF COMPLETION BY _____ DATE 12/11/24

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

The location of the proposed Prefab Building addition does not appear to impact the existing septic system.
**NOTE: _____

Sanitarian's Copy: Pink Owner's Copy: Gold

_____ REHS
Date: Sept 21, 2010
ICHD-Environmental Health Division