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 Hope Brothers DATE 10-27-80 PERMIT NO.

PHONE: Business Home

LOCATION 70E TR into Beaver Fm

SUBDIVISION NAME Beaver Farm LOT NO. 55 S. R. No.

House ( ) Mobile Home (✓) Business ( ) Other SECTION OR BLOCK NO. Actually lot 56 due to lot layout

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 1/2 acre+

Character & Porosity of Soil Appling Clay

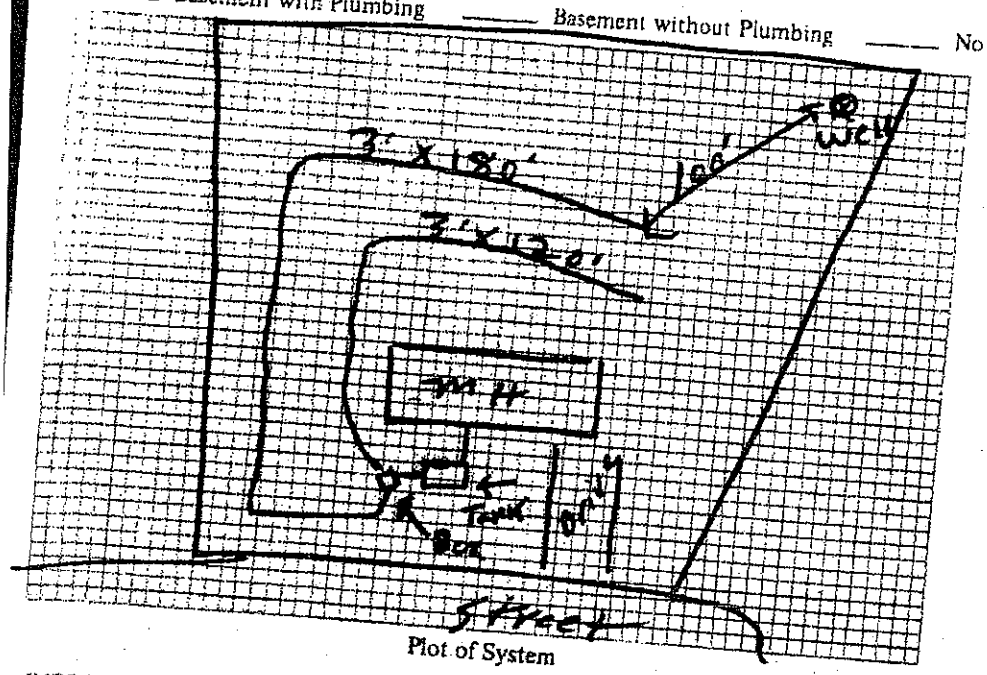
Percolation Rate 5 gal/sq ft

Topography 2 to 12% Slope

Depth to Water Table 10'+

Rock or other impervious formations none

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Hope Brothers

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

Signed: _____

IMPROVEMENTS PERMIT BY D. C. Moore

COMMENTS: unapproved stone used in ditch

responsibility to remove if failure Hope Brothers →

CERTIFICATE OF COMPLETION BY D. C. Moore DATE 10-27-80

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