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 Mr. Richard Falls DATE 4-21-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Rd # 2171 T L in to Baymount Meadows

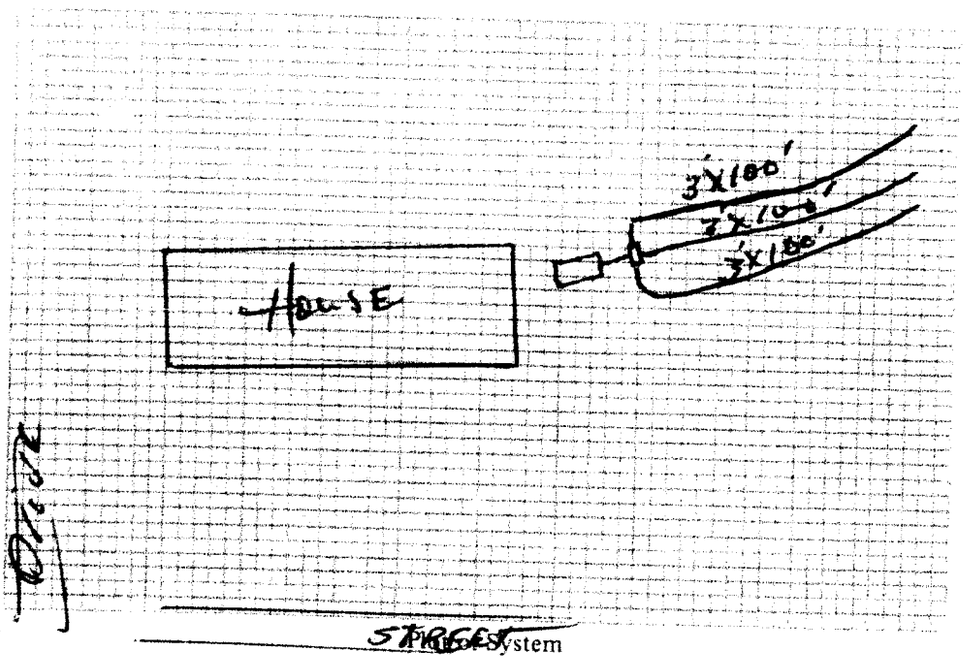
SUBDIVISION NAME Baymount Meadows LOT NO. 2 S. R. No. _____ SECTION OR BLOCK NO. A

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

No. Bedrooms 4 No. Bathrooms 3½

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	@ 7c2
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	1" — 60 min
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2 to 6% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	none
			Rock or other impervious formations	none

Lot Area 2 Acres



Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 700 Linear Ft. 300

Depth of Stone in Lines 16"

Water Supply: Individual (✓)

Public ( )

Installed by Donald Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 4/21/78

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