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 Mrs. J. T. Barham DATE 6-29-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION US 21 N 3rd house on left Past Freedom Pres6. Church S. R. No. _____

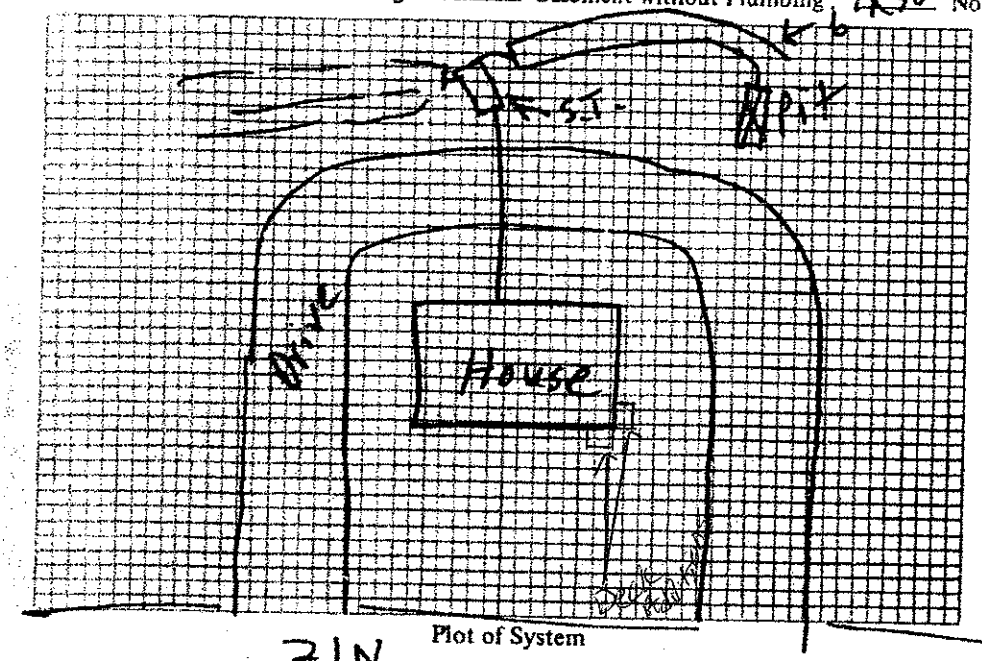
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Deck Additions Fair

Location of the proposed addition does not appear to impact the existing on-site septic system.**NOTE: Mark Henderson REHS
Date: 8-19-13
ICHD-Environmental Health Division

Porosity of Soil Clay loam
Rate 15 sq ft/s'd Fair
2 to 6 go
Water Table 10' +
Rock or other impervious formations none

_____ Basement with Plumbing _____ Basement without Plumbing 14x50' No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)
+ 16 Ton Pit at end of new line
Installed by Roger Sigmon

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

Signed: _____

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 6-29-83

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