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 8-13-82 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Dunlap Gate - off Hwy 21 north.

S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 10 SECTION OR BLOCK NO. _____

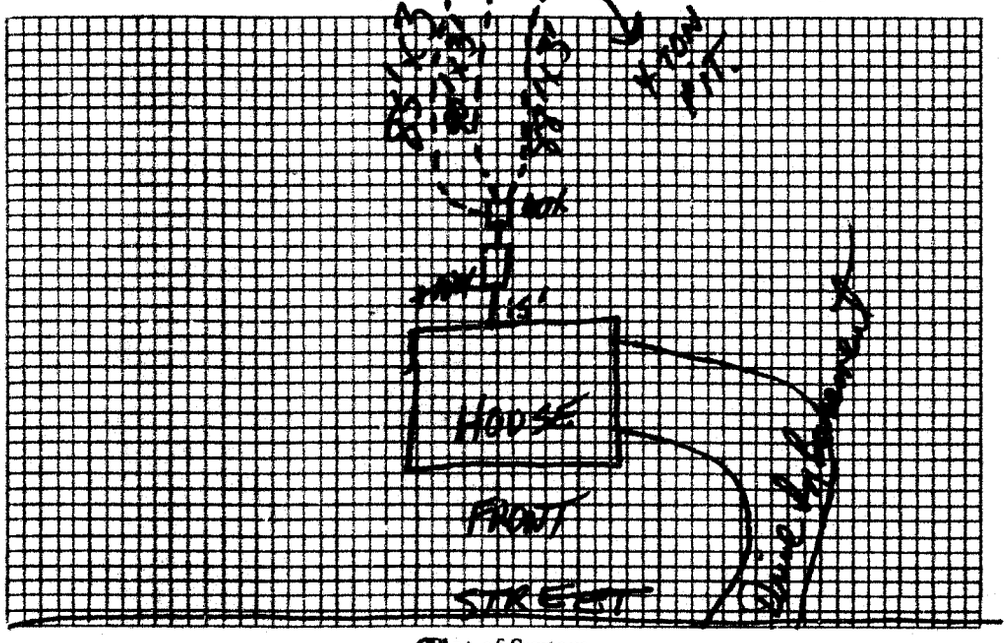
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1.5

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area Ample

Character & Porosity of Soil reddish fine sandy clay
Percolation Rate .6 gal/sq. ft.
Topography 2 - 6%
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 3
Sq. Ft. 789 Linear Ft. 263
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)
+ 4 top pit at end of sewer line.
Installed by Hope Bros.

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

Signed: _____

IMPROVEMENTS PERMIT BY J. C. Meeks

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 8-13-82

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