08004

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 Edwin Hunter Homes DATE 8-10-88 PERMIT NO 10/11

PHONE: Business _____ Home _____

LOCATION Lot 374 Corner St Andrews + Camden S. R. No. _____

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

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

No. Bedrooms 4 No. Bathrooms 3

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

Character & Porosity of Soil Clayey

Percolation Rate .2

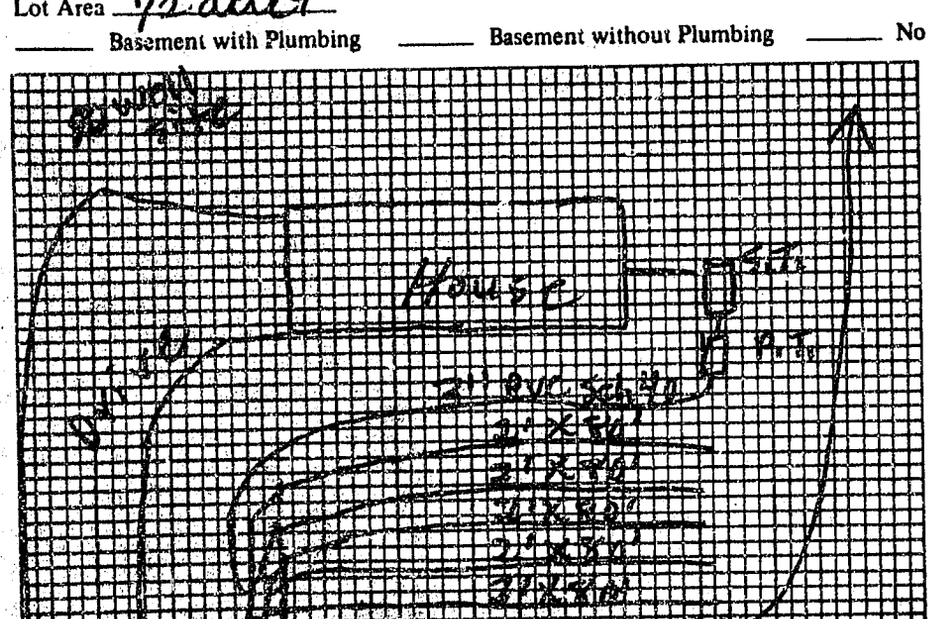
Topography 2 to 6%

Depth to Water Table 4'+

Rock or other impervious formations none

Lot Area 1/2 acre+

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 Septic Tank 1000 Pump Tank Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ( )

Public ( )

400' 16" T+J Panel system

Installed by Paul Frye

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

Signed: _____

IMPROVEMENTS PERMIT BY R. C. Moore

COMMENTS: 3 lower lines are on - In ~~use~~ use 6 mos Turn 2 lower lines off & Turn upper 2 on & leave middle line open all times. Repeat pattern every 6 mos.

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 5-12-89

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