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 Ray Hogan DATE 8-25-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION E Broad Ext. TR on St. Andrews at ent TL on Linville Rd TL onst. Cloud ½ mi on left S. R. No. _____

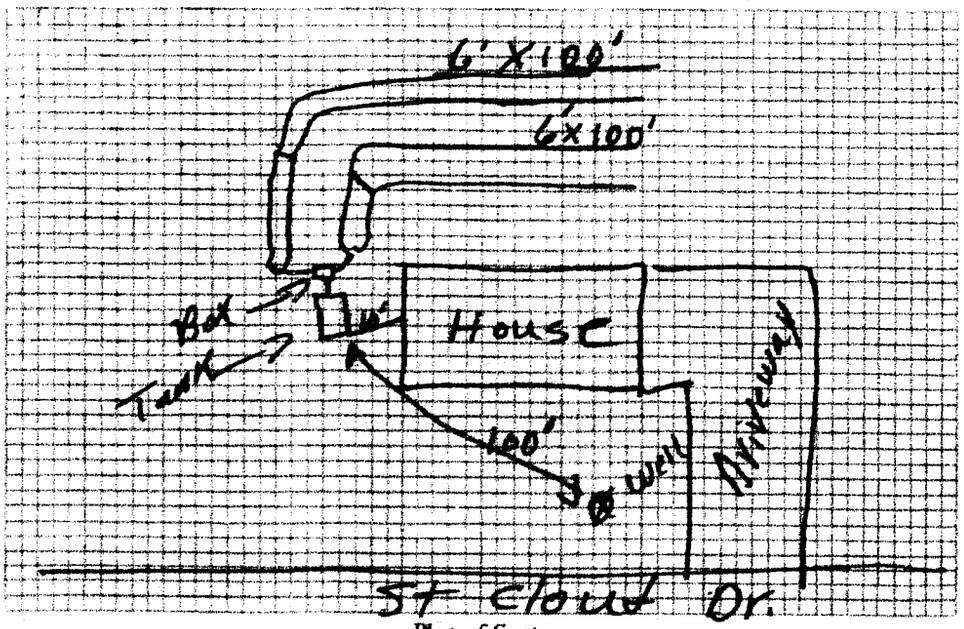
SUBDIVISION NAME Shannon Acres LOT NO. 234 SECTION OR BLOCK NO. _____

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 ( )
Lot Area ½ acre +

Character & Porosity of Soil Appling variance Heavy clay no structure
Percolation Rate Est. Perc rate 120 min / inch +
Topography 4% slope
Depth to Water Table 8 to 10'
Rock or other impervious formations none



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Don Lackey

IMPROVEMENTS PERMIT BY Glenn Fox Jr.

COMMENTS: The soil conditions where the system is installed are very poor for percolation. It is very likely that the system will malfunction. Therefore owner should be prepared to repair. It is the opinion of this inspector that an improvements permit should not have been issued. approved on construction only

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 8-25-78

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