03931

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 Carolina E.E. Homes DATE 4-2-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E. To Lawson Lime Rd to second 1 mile TR into Country Woods Home on left S. R. No. _____

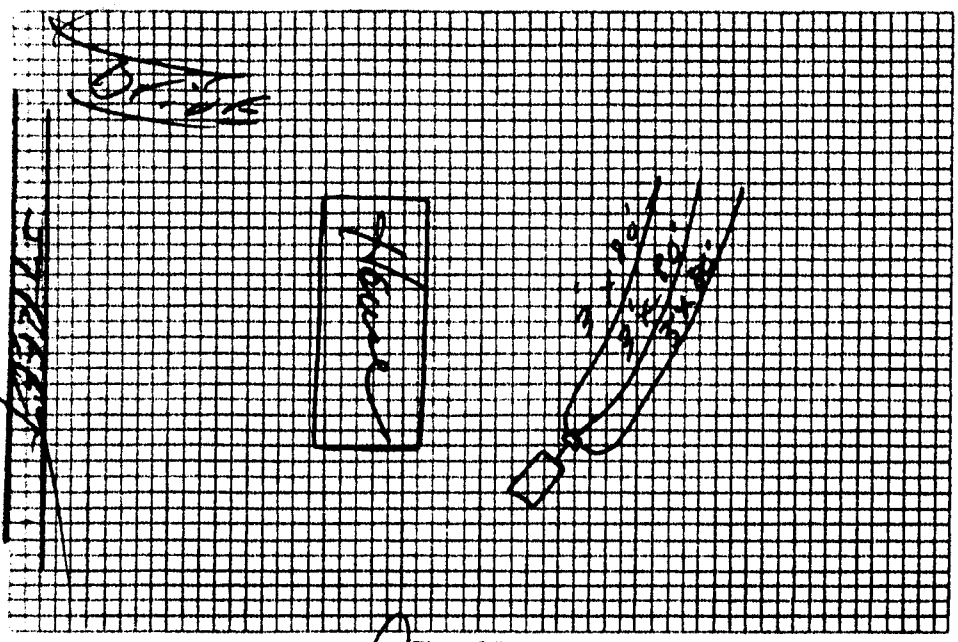
SUBDIVISION NAME Country Woods LOT NO. 91 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area 1/2 Acre

Character & Porosity of Soil Clay Loam
Percolation Rate 5
Topography 2 - 6% Slope
Depth to Water Table _____
Rock or other impervious formations None.



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 120 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (X)

Installed by Wayne Snyder
Ellis S.T. Service

IMPROVEMENTS PERMIT BY J.C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Hall DATE 4/4/86

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