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 Coley Hawkins DATE 5-11-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E - TL on Rd # 2177

S. R. N. _____

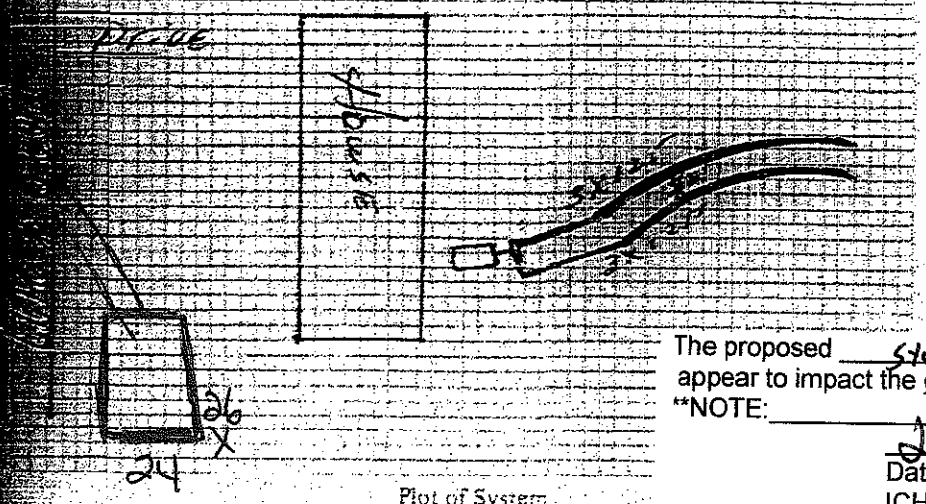
SUBDIVISION NAME Salem Park LOT NO. 48 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area Approx 3/4 Acre

Character & Porosity of Soil Clay
Percolation Rate Good
Topography 2-6% Slope
Depth to Water Table 48"+
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 250 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Hole Septic Tank Co.

The proposed Storage Building addition does not appear to impact the existing septic system.
**NOTE: _____

_____ R.S.
Date: 28 May 2010
ICHD-Environmental Health Division

IMPROVEMENTS PERMIT BY _____

COMMENTS _____

CERTIFICATE OF COMPLETION BY _____ DATE 5/11/78

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

JAN. 10, 1989 13:26