IREDELL COUNTY HEALTH DEPARTMENT

13502 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR BILLY L. SPARKS DATE 10/16/91 PERMIT NO. 15H-A-30A

PHONE: Business _____ Home _____

LOCATION I-77 N, TL NC 901 W, TR GRASSY KNOB ROAD, ON (L) AT 3RD HOUSE ~ ½ MILE S. R. No. _____

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

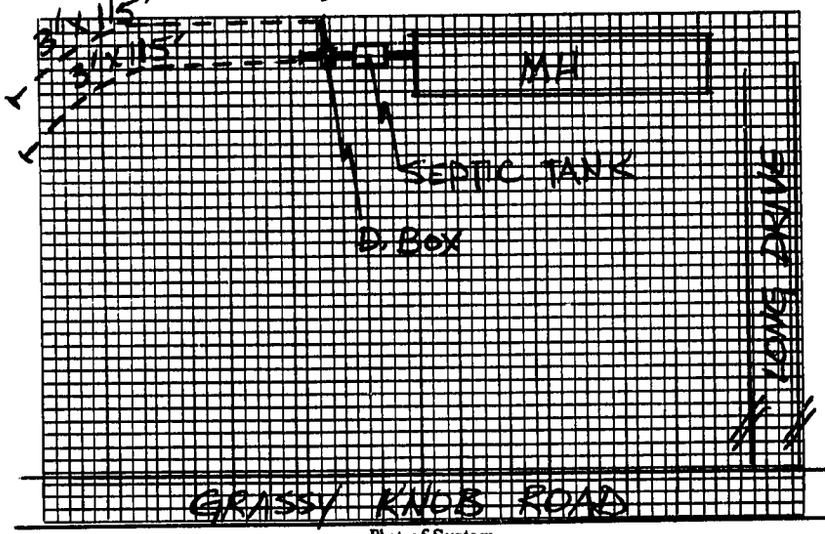
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 10.76

Character & Porosity of Soil PS
Percolation Rate .35 GPD / FT2
Topography 2-4% RS
Depth to Water Table 24"
Rock or other impervious formations NONE

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

ACP 8/28/91



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 690 Linear Ft. 230
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by A-1 BACKHOE

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HEDRICK

COMMENTS: _____

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 10/16/91

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