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 KELLY SHARPE DATE 6-28-88 PERMIT NO.

PHONE: Business Home

LOCATION Hwy 21 - T.R. on Upson School Rd. - T.L. immediately on Walnut Hill Rd. - 1st house on left. G. R. No.

SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

House ( ) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms No. Bathrooms

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

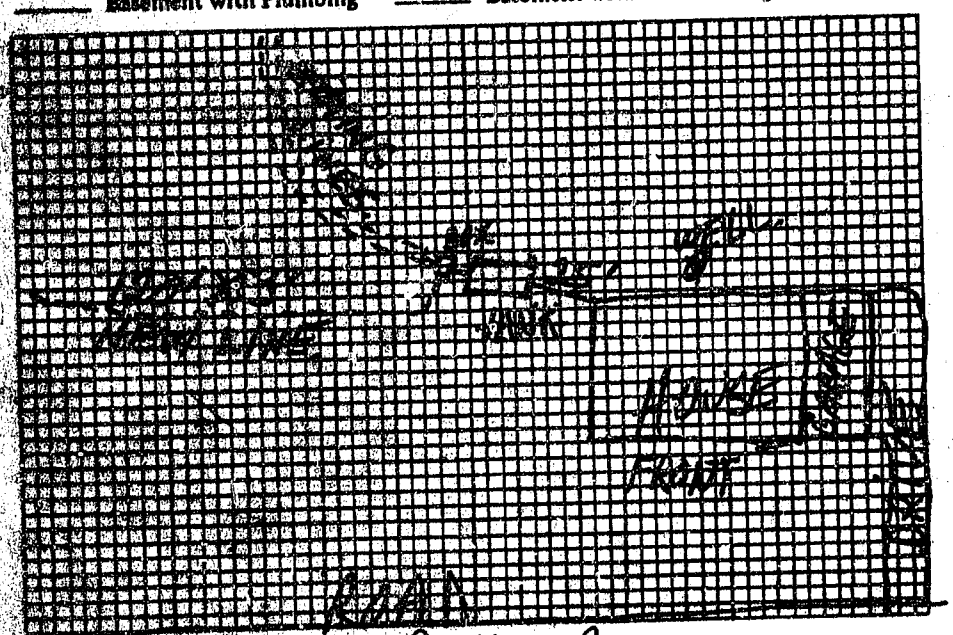
Lot Area Apple

Character & Porosity of Soil
Percolation Rate
Topography
Depth to Water Table
Rock or other impervious formations

Repair

✓ No Basement

_____ Basement with Plumbing _____ Basement without Plumbing



Plot of System

Size of Tank EXISTING Gals.

Nitrification Field:
No. of Lines
Sq. Ft. 360 Linear Ft. 120
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Dennis Hallifax

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS:

CERTIFICATE OF COMPLETION BY Steve Brown DATE 6-28-88

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