08882

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 Steven R Steward DATE 12 2008 PERMIT NO. 09

PHONE: Business _____ Home _____

LOCATION Old Old Rd N of 40W & New Sterling Church R Linden R Balick 1st mail on Left use back aff Rd S. R. No. _____

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

Basement

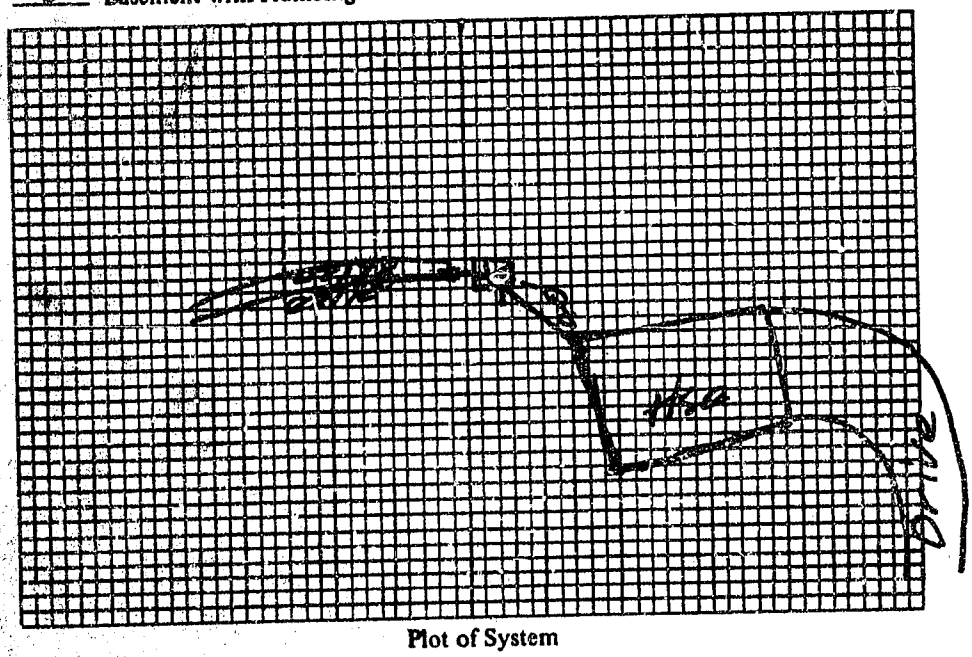
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	poor suitable
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Hilly
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	
			Rock or other impervious formations	None

Lot Area 20 Ac

(✓) Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 280 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Spring

Installed by David Yarbrough

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

Signed: _____

IMPROVEMENTS PERMIT BY [redacted] Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY P Thomas DATE 12 2008

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