FHA Bobby Combs

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 TODD CRANFORD DATE 7-9-81 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 - go past Scotts School g.t.l. on 1st STATE hardtop, go about 2 miles - house on (R) up on a hill. S. R. No. _____

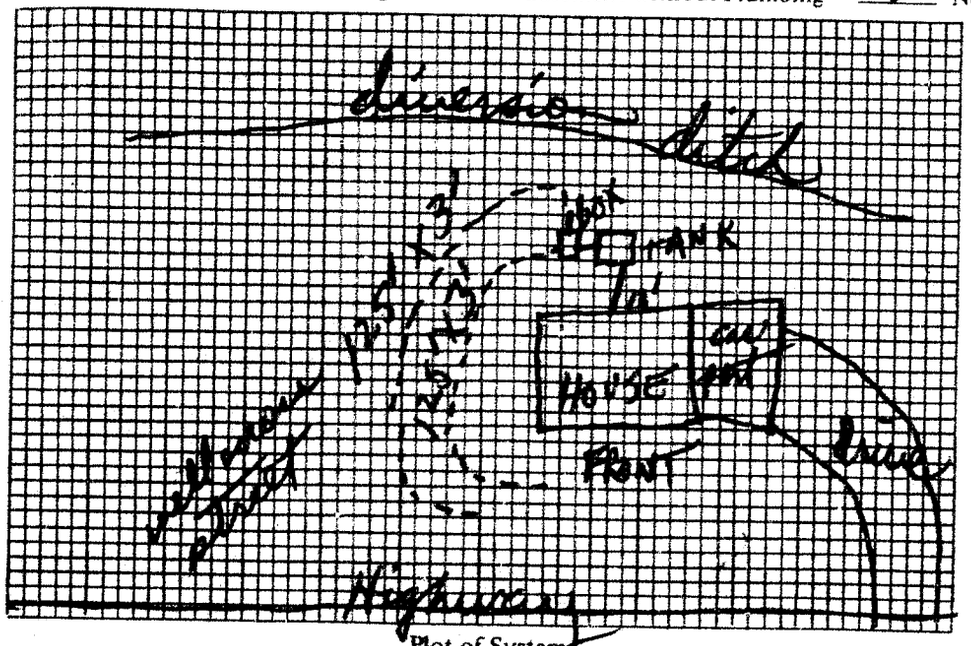
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	sl. fine sandy loam	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	60 gal/sq. ft.	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6-10%	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+	
Lot Area	Ample		Rock or other impervious formations	none observed.	

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Tommy Cothren

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Pipe off downspouts from gutters so they won't empty out over drain lines.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 7-9-81

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