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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 C. J. Sherrill DATE 12-16-86 PERMIT NO. 636

PHONE: Business _____ Home _____

LOCATION 1115 TR 1455 (E. Lakeview) TL Abbot TL E. Lakeview on Rt. at end of pavement S. R. No. _____

SUBDIVISION NAME L.V. LOT NO. 1626 SECTION OR BLOCK NO. 8

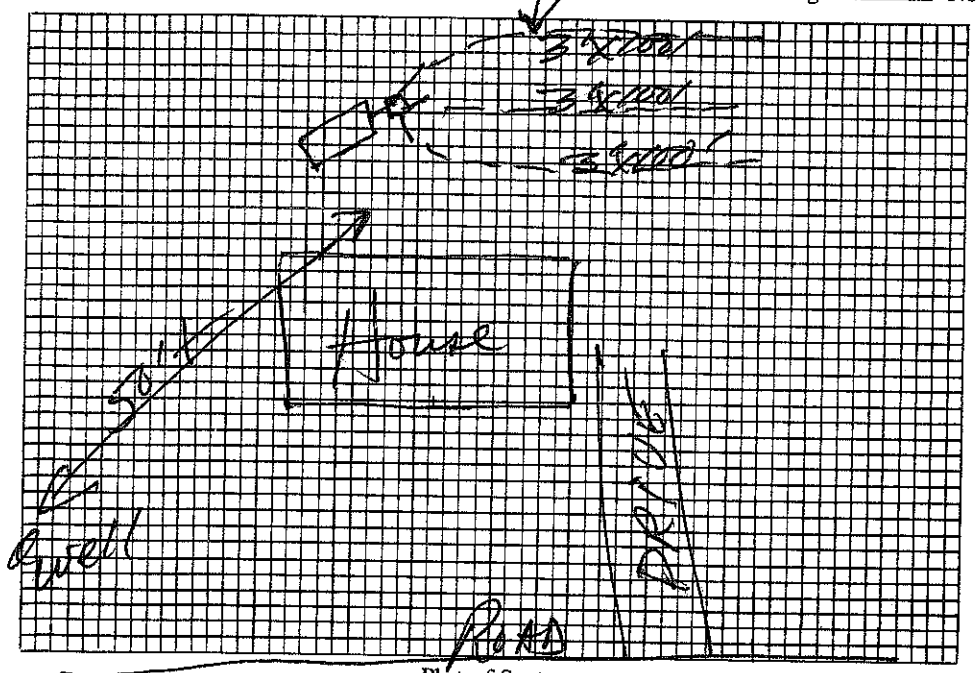
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	2-4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	gently
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6+
			Rock or other impervious formations	none obs.

Lot Area 1.64c

✓ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Denver Plumb

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

Signed: _____

IMPROVEMENTS PERMIT BY J C Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. K. Hinson R.S. DATE 12-16-86

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