4626106858

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 Jerry Oliver DATE 5-20-87 PERMIT NO.

PHONE: Business Home

LOCATION 1100 TR 1177 TL 1st Barber Loop (1458) a 1/2 mile on left S. R. No.

SUBDIVISION NAME L.N. LOT NO. 153 SECTION OR BLOCK NO. 7

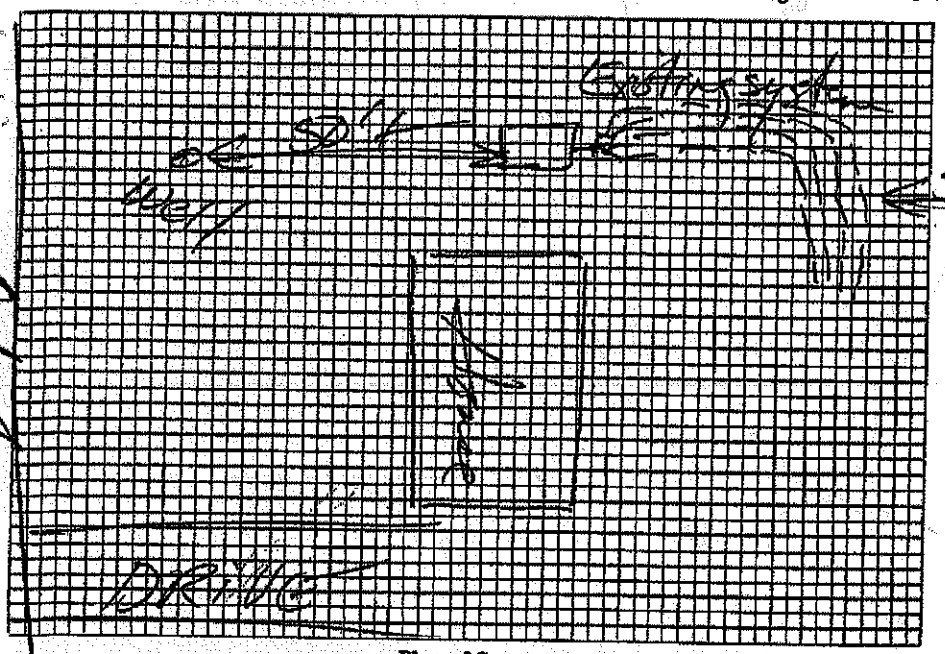
House (✓) Mobile Home ( ) Business ( ) Other

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate
Auto. Wash. Machine	Yes (✓)	No ( )	Topography
Site Suitable	Yes ( )	No ( )	Depth to Water Table
			Rock or other impervious formations

Lot Area Existing

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines Existing
Sq. Ft. Linear Ft.

Depth of Stone in Lines

Water Supply: Individual (✓)
Public ( )

LAKE

Installed by

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

Signed:

IMPROVEMENTS PERMIT BY

COMMENTS: Existing system OK at time of inspection

CERTIFICATE OF COMPLETION BY DATE

EXISTING SYSTEM CHECKED BY: D. Johnson, R.S. DATE 5-20-87

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