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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 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

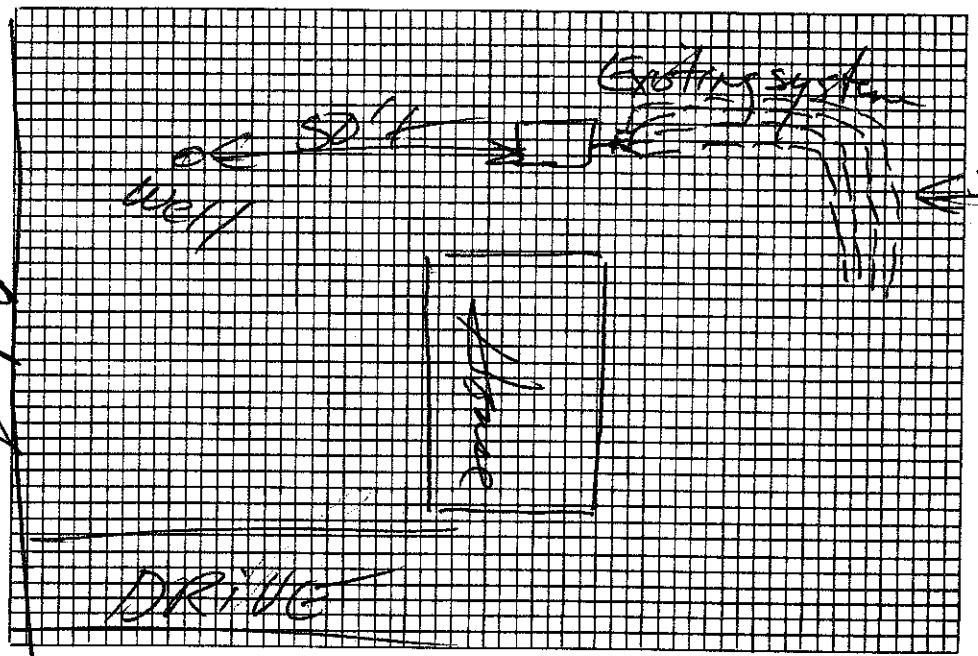
House (✓) Mobile Home ( ) Business ( ) Other

No. Bedrooms 2 No. Bathrooms 2

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

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

_____ 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. Hinson, 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