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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 Anne Sherrill DATE 5-24-85 PERMIT NO. 233

PHONE: Business _____ Home _____

LOCATION 108 TR 1115 TR 1455 TR 1292
Abbott Road 600 FT on RSW 1455 (Lakeview) S. R. No. _____

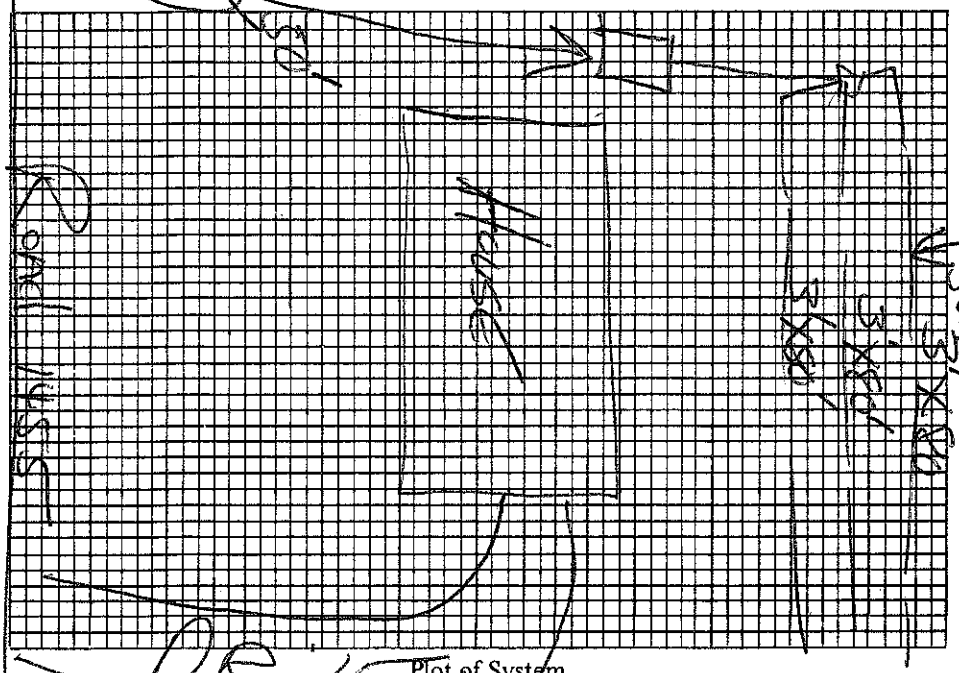
SUBDIVISION NAME LAKE NORMAN LOT NO. 122 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area 20,000+ FT

Character & Porosity of Soil Clay
Percolation Rate 0.5 gal/ft²/day
Topography 2-7%
Depth to Water Table 24"
Rock or other impervious formations NONE OBS.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 120 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by WAYNE Onbison

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: OK Layout change

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 5-24-85

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