3.00 +130=2100 4,00

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 Steve Abernathy DATE 3/3/86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Brawley School Rd, Rt on 1178, Lt on 1234, Rt on 1235 1st on Rt

S. R. No. _____

SUBDIVISION NAME Crescent Lot 1 LOT NO. 1562 SECTION OR BLOCK NO. _____

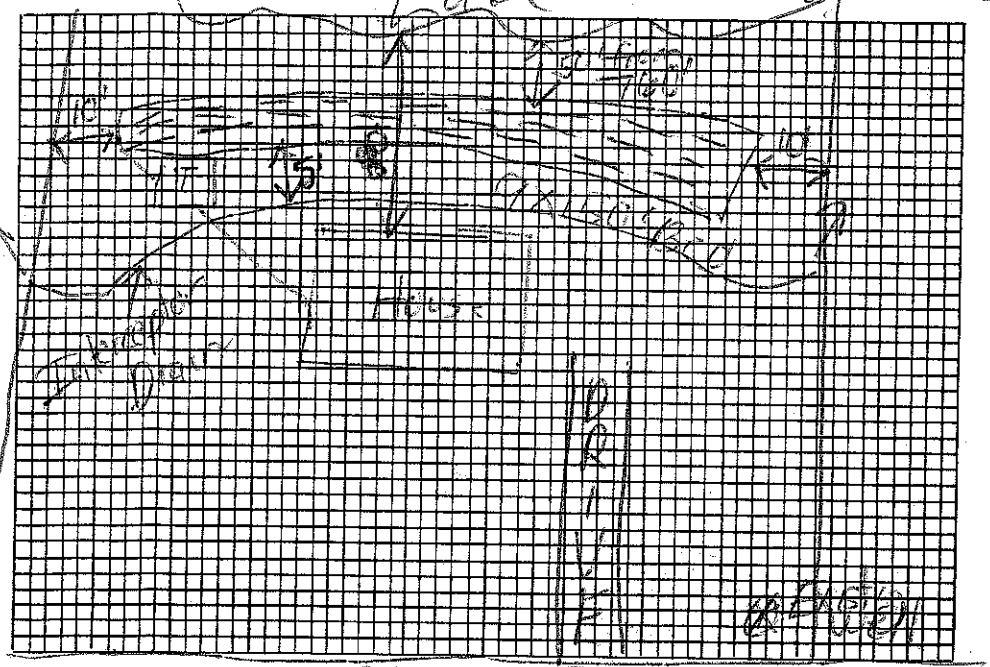
House (✓) Mobile Home ( ) Business ( ) Other _____ Revision of Existing Permit Due to Relocation of House

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay / silty pm
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	0.4 and/hr
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	10-15%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+
			Rock or other impervious formations	None Noted

Lot Area 20,000

___ Basement with Plumbing / ac Basement without Plumbing ___ No Basement



Plot of System SR 35

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3 in 9' Bed
Sq. Ft. 1350 Linear Ft. 150
Depth of Stone in Lines 12"

Water Supply: Individual (✓) On Site
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: System could not be installed 50' from 760' Contour according to old permit of 3/20/85. 9'x150' Bed w/ Increator is the best that could be done. Keep system 50' from 760'

CERTIFICATE OF COMPLETION BY _____ DATE _____

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