IREDELL COUNTY HEALTH DEPARTMENT

11734 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR James Haggerty DATE 10/16/91 PERMIT NO 2F10-A-3

PHONE: Business _____ Home 664-3485

LOCATION McKendree Rd, 1100 TR McKendree, on right across from McKendree Chapel S. R. No. _____

SUBDIVISION NAME Brookridge Shores LOT NO. 3 SECTION OR BLOCK NO. _____

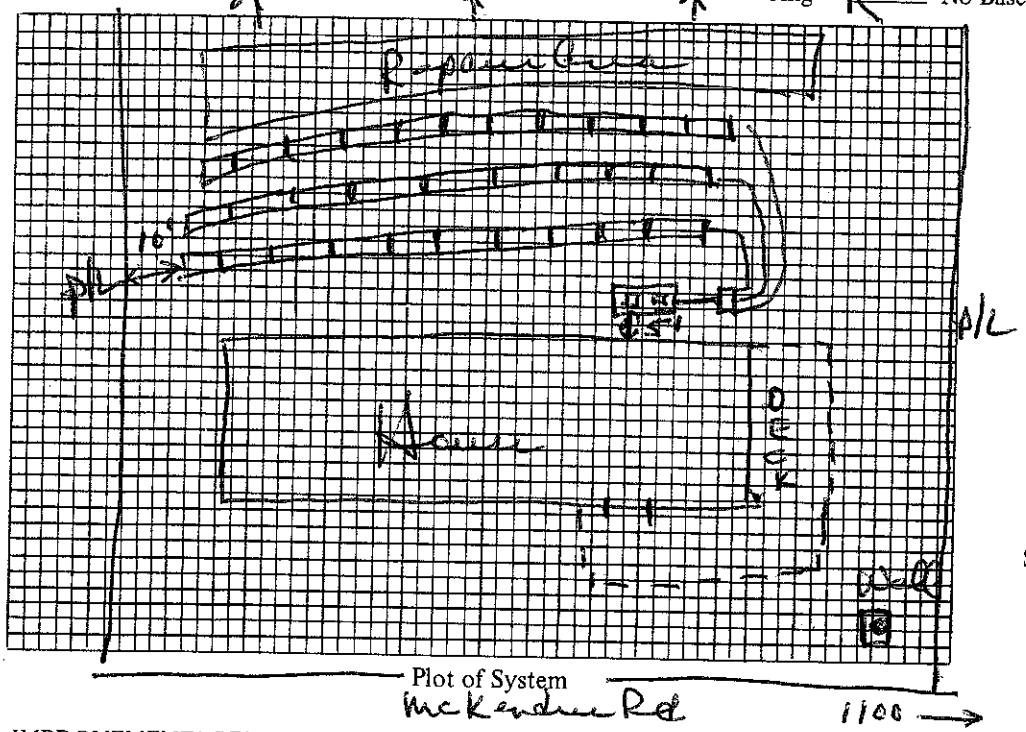
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	A-C-(1ft)
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	3
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	5%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	48"
			Rock or other impervious formations	None observed

Lot Area NONE GIVEN ON P.A.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 240
Depth of ~~Stone~~ SAND in Lines Levelled - 10" Gravel
Water Supply: Individual (✓)
Public ( )

Installed by Walter Barton

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 10/16/91

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