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IREDELL COUNTY HEALTH DEPARTMENT 4628918388

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Donald Sprinkle DATE May 29, 1990 PERMIT NO. ZN-3-A-271C

PHONE: Business _____ Home _____

LOCATION 150 TR Waddell TR Hermance Tr Hollyhock On left S. R. No. _____

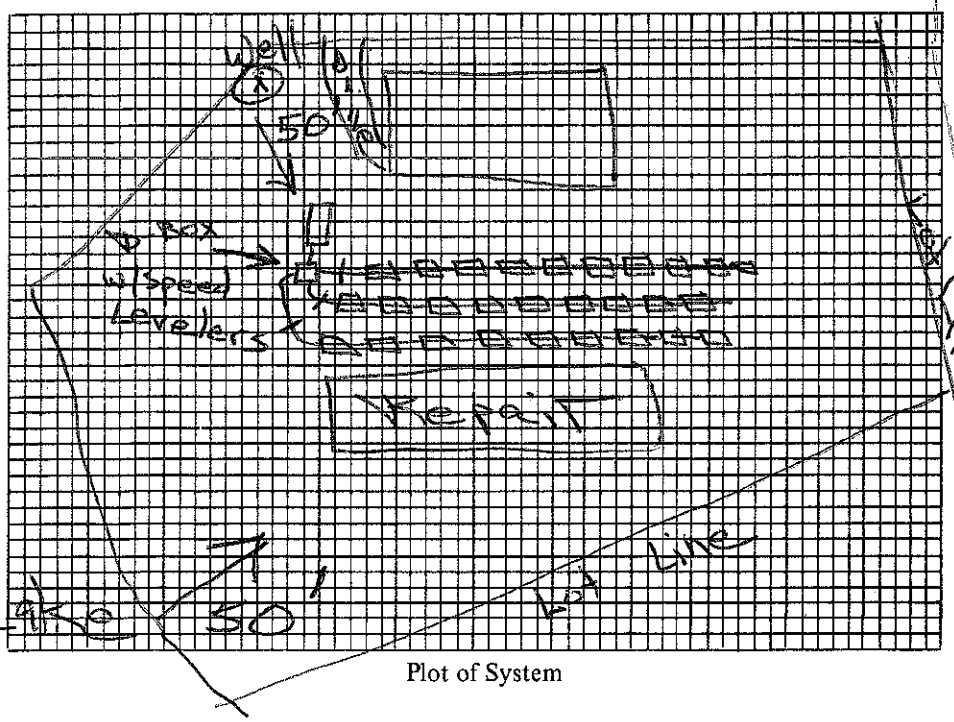
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3	No. Bathrooms 1			Character & Porosity of Soil	loamy clay
Garbage Disposal Unit	Yes ( )	No (✓)		Percolation Rate	N. 25 gpd/sft
Auto. Dishwasher	Yes ( )	No (✓)		Topography	15-20%
Auto. Wash. Machine	Yes (✓)	No ( )		Depth to Water Table	+3'
Site ~~Suitable~~ OS	Yes ( )	No ( )		Rock or other impervious formations	none obs.

Lot Area 1.19 ac

_____ Basement with Plumbing _____ Basement without Plumbing (✓) No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 240'
Depth of Stone in Lines 7" +

Water Supply: Individual (✓) 16" Panel
Public ( ) 55 Panels

Installed by JC Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well not installed at time of certificate of completion issuance

CERTIFICATE OF COMPLETION BY Sam Ingram EHS DATE 3/29/90

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