IREDELL COUNTY HEALTH DEPARTMENT

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

45 3 135

OWNER OR CONTRACTOR Dick Lattimer DATE 1-10-86 PERMIT NO. 16

PHONE: Business _____ Home _____

LOCATION 150 W. SR 1303 TO 1300 AT END BR ON New black top 1st Lot on Left S. R. No. _____

SUBDIVISION NAME Point of View LOT NO. 1 SECTION OR BLOCK NO. _____

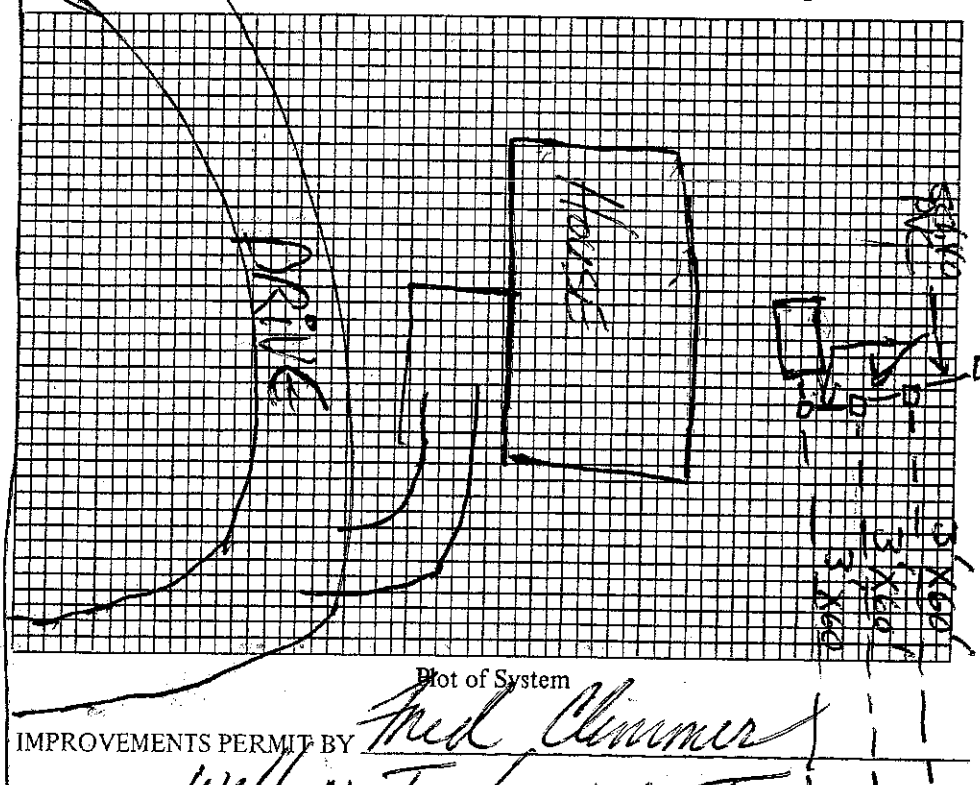
House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

Garbage Disposal Unit	Yes (X)	No ( )	Character & Porosity of Soil	Clay-loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.5 gal/ft²-day
Auto. Wash. Machine	Yes (X)	No ( )	Topography	8 to 10%
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4 ft
			Rock or other impervious formations	NONE obs.

Lot Area 20000 FT²

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by CMM Construction

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Will not down yet

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 1-10-86

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