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 WESLEY SHERRILL DATE 4-14-89 PERMIT NO. 17D.

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. all the way around T.R. on Allendale Rd. go 1/2 mi. on left. S. R. No. _____

SUBDIVISION NAME ALLENDALE POINT LOT NO. 26 SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Repair.

No. Bedrooms 3 No. Bathrooms 2.5

Garbage Disposal Unit Yes ( ) No ( )
Auto. Dishwasher Yes ( ) No ( )
Auto. Wash. Machine Yes ( ) No ( )
Site Suitable Yes ( ) No ( )

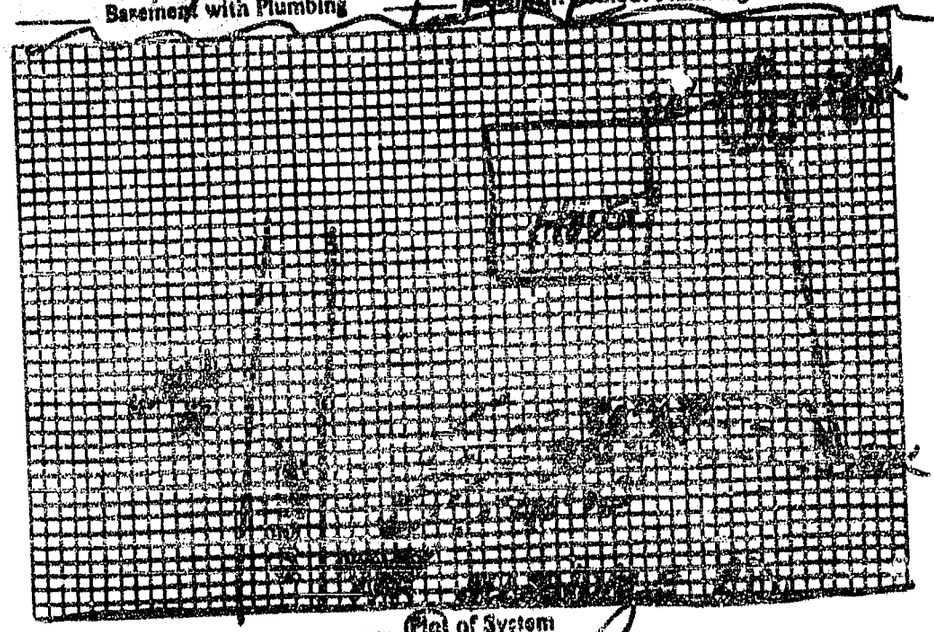
Character & Porosity of Soil _____
Percolation Rate _____
Topography Repair.
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area Ample.

_____ Basement with Plumbing _____ Crawl Plumbing _____ No Basement

Size of Tank 1000 & 1000 PUMP TANK Gals.

Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public ( )



Plot of System

Installed by Mike Holland

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Lot 26' application 1 bedr. drain line down 4 bdrm. Lot off. Main 24' from sewer drain line

CERTIFICATE OF COMPLETION BY Steve Brown DATE 4-14-89

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