4629-65-8718

IREDELL COUNTY HEALTH DEPARTMENT

16032

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR Steve Brotherton DATE 4/14/93 PERMIT NO. 3C 11A 181

PHONE: Business _____ Home 663-3594

LOCATION Perth Rd N, TL on State Park, TL on Morrison Farm, TR MARYSLN to 3rd lot on (R) S.R. No. _____

SUBDIVISION NAME CL + T LOT NO. 181 SECTION OR BLOCK NO. 17

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area Existing

Soil Characteristics Existing System

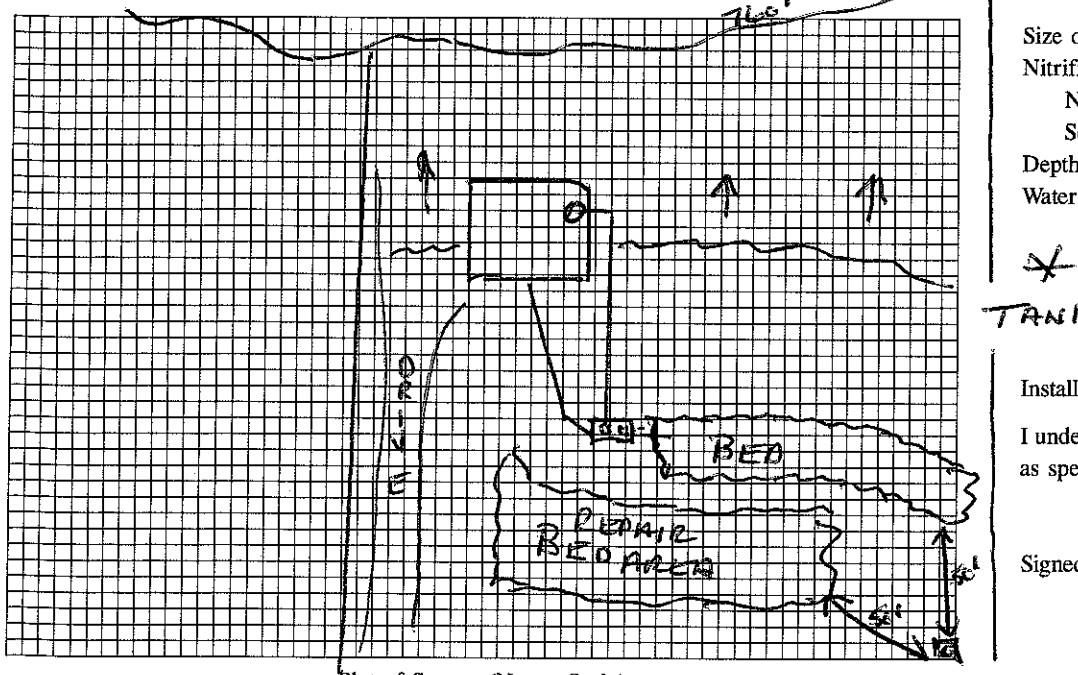
Application Rate Clay Trans

Topography

Depth to Water Table

Rock or other impervious formations

_____ ✓ Basement with Plumbing _____ Basement without Plumbing _____ No Basement _____ Crawl Space



Plot of System (Not to Scale)

Size of Tank 175 * Gals.

Nitrification Field:

No. of Lines 0

Sq. Ft. 0 Linear Ft. 0

Depth of Stone in Lines _____

Water Supply: Individual ☐ Public ☐

* Add GRINDER Pump + TANK FOR BASEMENT

Installed by _____

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY Wesley Sparks ROADWAY RS.

COMMENTS Adding grinder pump in basement and tying system into existing system.

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold