06027

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 BARRY MEADOWS DATE 3-11-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. off State Park Rd. - go down to Morrison Dirt Lane (L) - 100 yards on (R). S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 36 SECTION OR BLOCK NO. _____

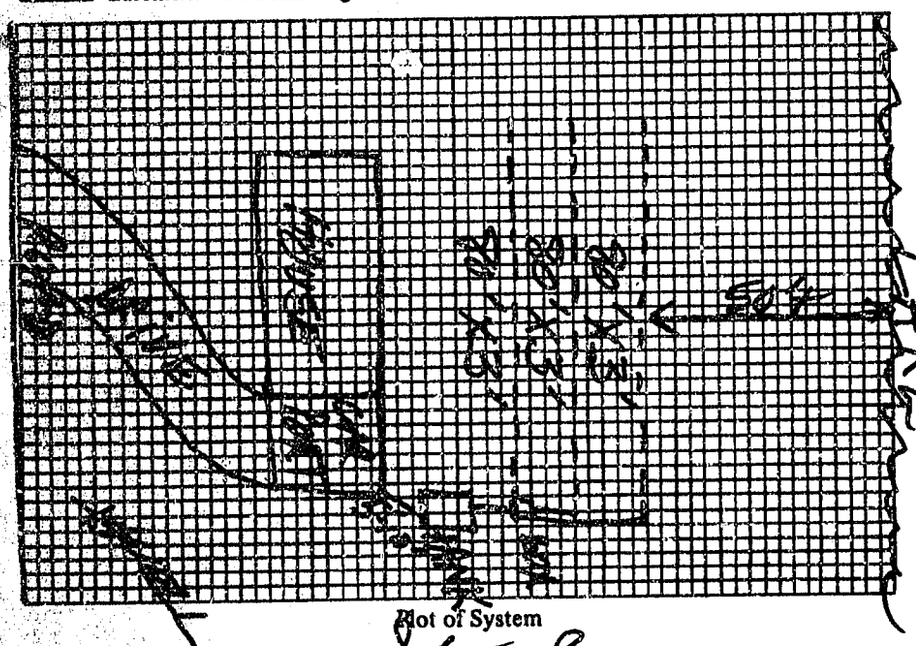
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1.5

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Loam Suitable.
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	5 gal./sq. ft.
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level/Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	
			Rock or other impervious formations	None observed.

Lot Area Ample

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



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Wayne Orbison

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 3-11-87

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