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IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION 3C-8-A-12
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR C. NOLTON BOAN DATE 7-18-90 PERMIT NO. D17

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. off State Park Rd. go all the way down to end - bear left - go around circle on left. S. C. No. _____

SUBDIVISION NAME MORRISON POINT LOT NO. 12 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 3

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

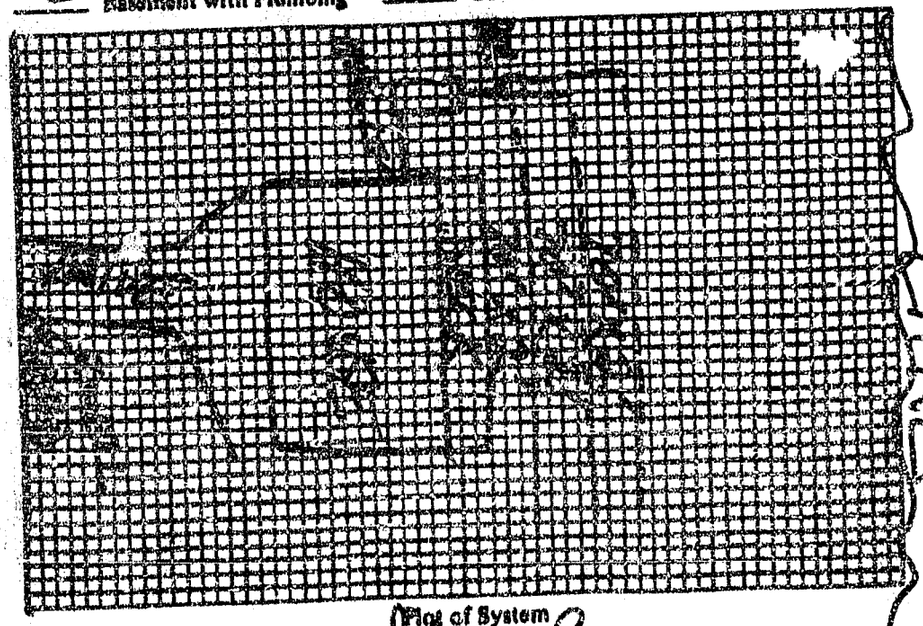
Lot Area 100' X 250'

Character & Porosity of Soil Poor Suitable.
Percolation Rate 60 min/in
Topography Level
Depth to Water Table 10'
Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 150 Lineal Ft. 210
Depth of Stone in Lines 6" STONE UNDER PANELS
Water Supply: Individual (✓)
Public ( )



Plat of System

Installed by Yount & Sons

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 7-18-90.

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