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 LARRY SIGMON DATE 10-15-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. off State Park Rd. - T.L. on Drymond Cut-Off Rd. at Bus Dig onto Stillwater Rd. - .7 mi. on left - new house S. R. No. _____

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

House (4) Mobile Home ( ) Business ( ) Other Repair

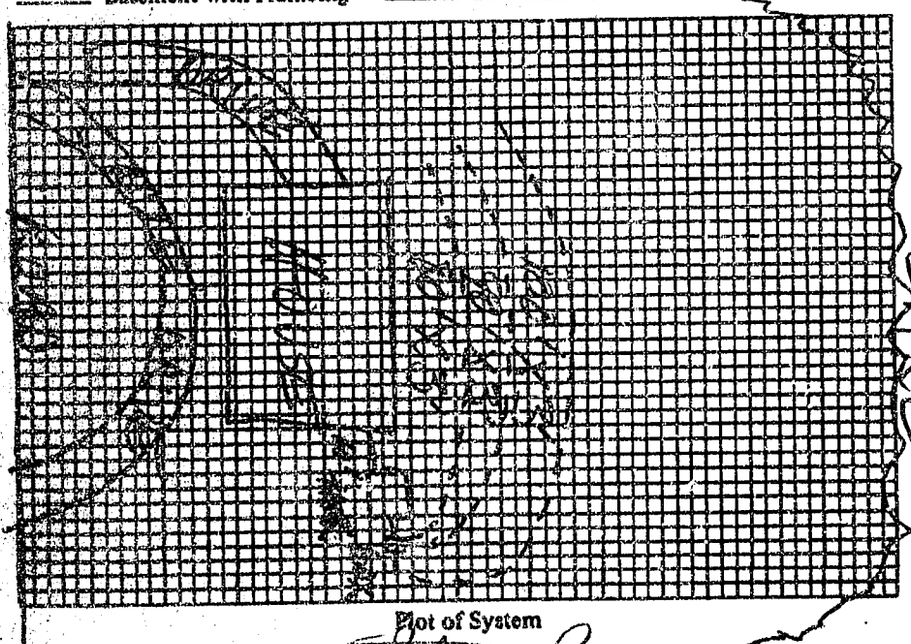
No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes (4) No ( )
Auto. Dishwasher Yes (4) No ( )
Auto. Wash. Machine Yes (4) No ( )
Site Suitable Yes (4) No ( )

Character & Porosity of Soil Prov. Suitable ?.
Percolation Rate 5 gal./sq. ft.
Topography 2-6%
Depth to Water Table 18+
Rock or other impervious formations none observed.

Lot Area Ample

_____ Basement with Plumbing _____ Basement without Plumbing 4 No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 810 Linear Ft. 270
Depth of Stone in Lines 12
Water Supply: Individual (4)
Public ( )

Installed by Chaffin Farms

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Washing machine & sink drain may tie back into old septic tank system.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 10-15-87

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