IREDELL COUNTY HEALTH DEPARTMENT 4634693433

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

OWNER OR CONTRACTOR Craft Home Corp DATE 5-13-80 PERMIT NO. 127

PHONE: Business _____ Home _____

LOCATION 1155 TR 1102 at end TR 1268 ON R ON corner of 1st intersection S. R. No. _____

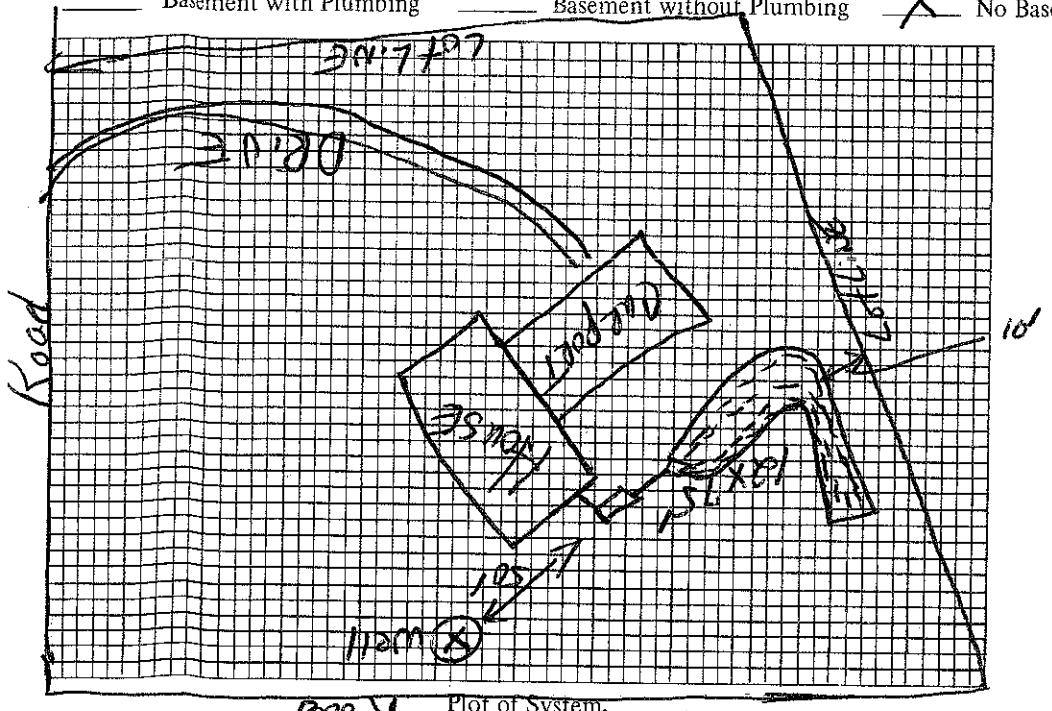
SUBDIVISION NAME Sailor's Lair LOT NO. 6 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	80 min 2"	
Auto. Wash Machine	Yes (X)	No ( )	Topography	2-4%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	unknown	
Lot Area 20,000 ft²			Rock or other impervious formations	None observed	

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"

Water Supply: Individual (X)
Public ( )

Installed by Blake Hyde

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

Signed: _____

IMPROVEMENTS PERMIT BY David Henson

COMMENTS: Relayout

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 5-13-80

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