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 Richard Lancaster DATE Oct 9, '87 PERMIT NO.

PHONE: Business Home

LOCATION 1100 TL 1112 (Shutts Rd.) TR 1st Shoreline Loop Bear left at water 500' on Rt S. R. No.

SUBDIVISION NAME Bayview Estates LOT NO. 12 SECTION OR BLOCK NO.

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

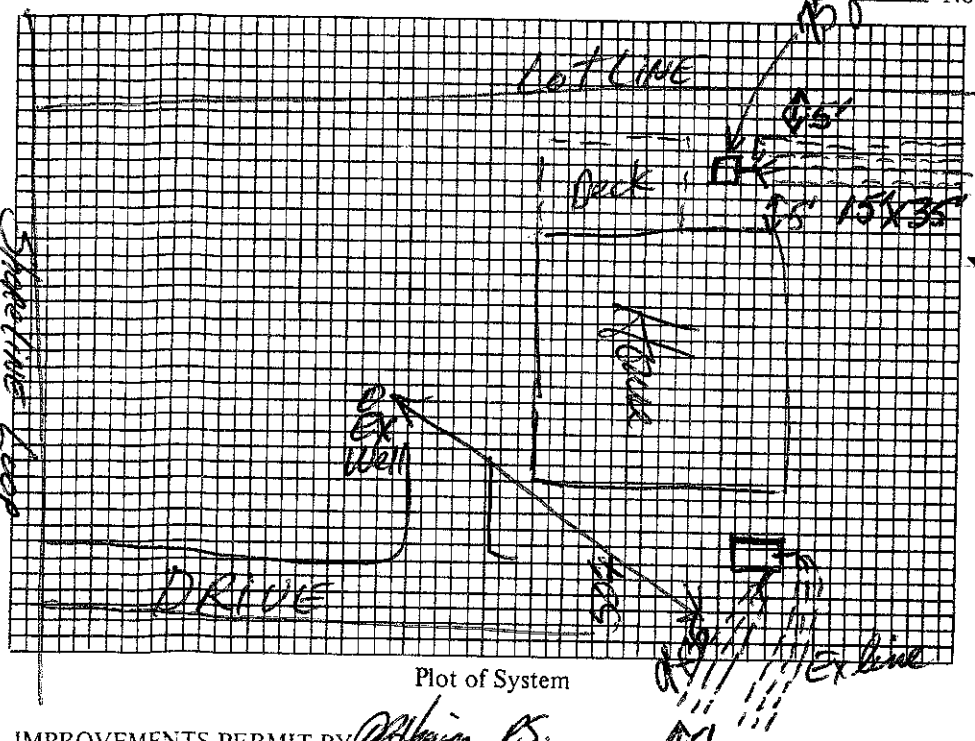
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil
Percolation Rate
Topography
Depth to Water Table
Rock or other impervious formations

Lot Area Existing

✓ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

FOR WASHER
750 gal washer tank
Size of Tank 75 Gals.
Nitrification Field:
No. of Lines 15'X35' Bed
Sq. Ft. 525 Linear Ft. 175
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by

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

Signed: Richard Lancaster

FOR Existing System
9'X35' Bed OR more if possible with 12" or more of stone maintaining At least 1 foot above 760 Elevation from bottom of drainfield ditch.

IMPROVEMENTS PERMIT BY R. Pearson, RS.

COMMENTS: Install as much repair line as room permits. Separate washer plumbing to go to new system. {If space permits, may set 900 gl tank & 15'X45' and plumb kitchen & washer together to new system}

CERTIFICATE OF COMPLETION BY (Space) 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 false information is supplied in making Improvements Permit.

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