IREDELL COUNTY HEALTH DEPARTMENT

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

WNER OR CONTRACTOR Tom Teamster DATE 12-16-82 PERMIT NO. 384

HONE: Business _____ Home _____

OCATION 1100 R1112 TL 2nd entrance 1212 TR
1241 (Sanford Dr.) 2nd house on left S. R. No. _____

UBDIVISION NAME Commodore Pen. LOT NO. 70 SECTION OR BLOCK NO. _____

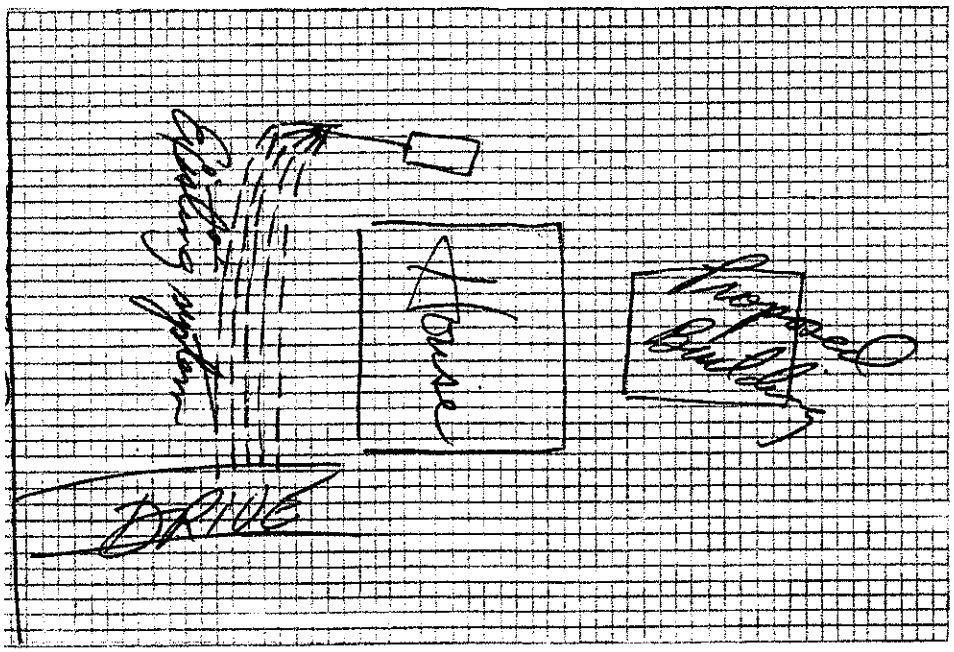
ouse (✓) Mobile Home ( ) Business ( ) Other Building storage facility behind house

o. Bedrooms 3 No. Bathrooms 2

arbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil
uto. Dishwasher	Yes (✓)	No ( )	Percolation Rate
uto. Wash. Machine	Yes (✓)	No ( )	Topography
ite Suitable	Yes (✓)	No ( )	Depth to Water Table
			Rock or other impervious formations

ot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system OK at time of inspection.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: David R. Hinson DATE 12-16-82