4635-79-1835

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 Robert W. Smith DATE Feb. 20, '90 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 Rt 1112 (Statesville Rd.) Rt 2nd 1212 (Commodore Loop) on left across from jct. w/ Surfside Drive S. R. No. _____

SUBDIVISION NAME Commodore LOT NO. 190 SECTION OR BLOCK NO. _____

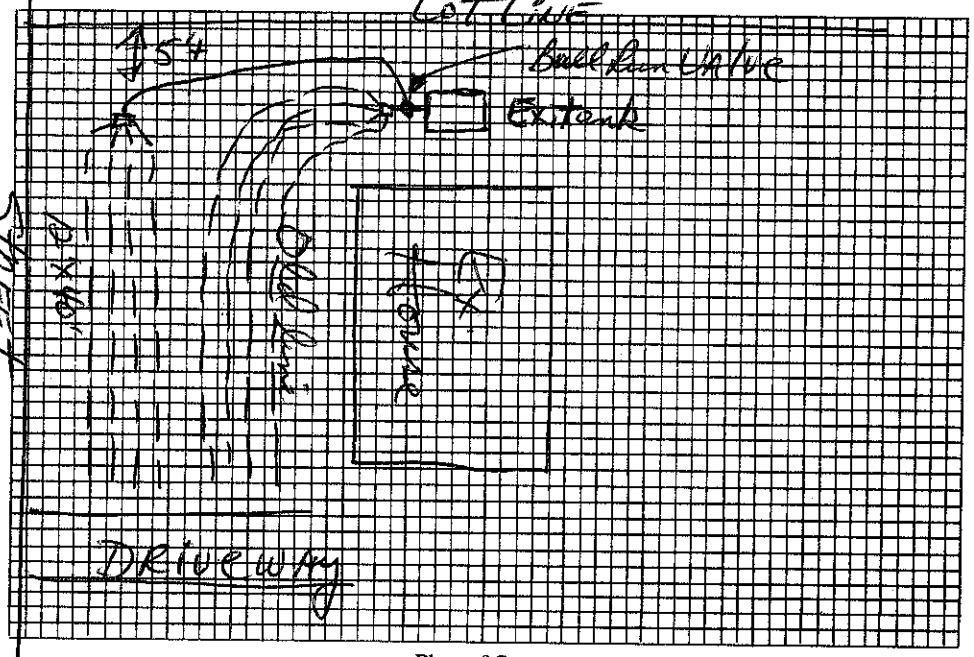
House (✓) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil		clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate		
Auto. Wash. Machine	Yes (✓)	No ( )	Topography		2%
Site Suitable	Yes ( )	No ( )	Depth to Water Table		4'+
			Rock or other impervious formations		none obs.

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 12'x40' Bed
Sq. Ft. 480 Linear Ft. 160
Depth of Stone in Lines 24"+

Water Supply: Individual ( )
Public (✓) CW

Installed by Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing water line to be held maximum possible distance above septic line (12"-18").

CERTIFICATE OF COMPLETION BY _____ DATE Feb 20, 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