IREDELL COUNTY HEALTH DEPARTMENT 4636513160

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

OWNER OR CONTRACTOR Richard Dixon DATE 7-15-81 PERMIT NO. 219

PHONE: Business _____ Home _____

LOCATION 1100 Rt 1112 Rt 2nd entrance to Surfside Estates S. R. No. _____

SUBDIVISION NAME Surfside Estates LOT NO. 269 SECTION OR BLOCK NO. _____

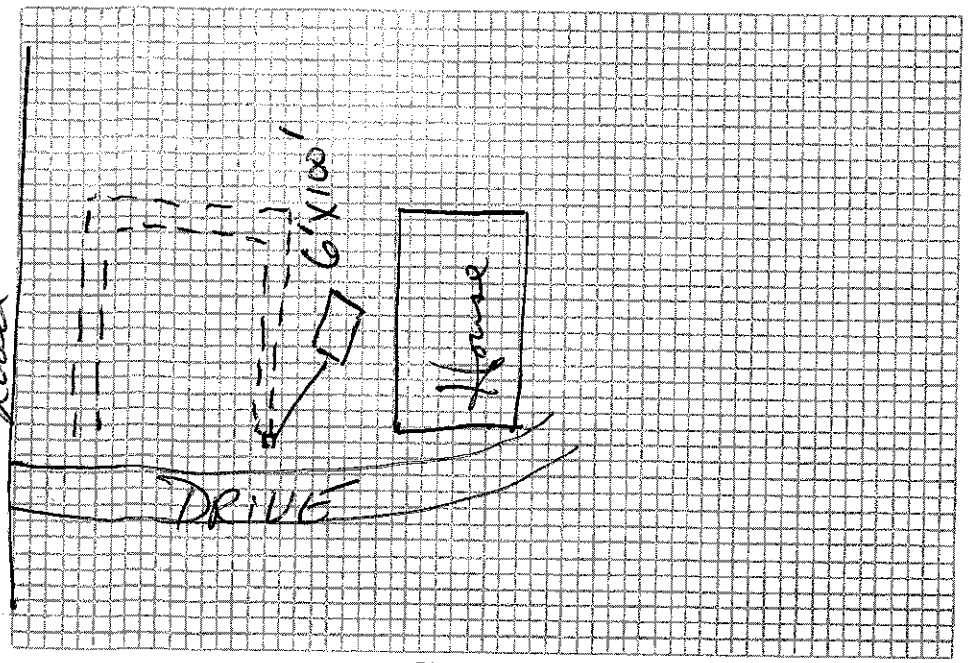
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay loam
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	60 min +
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4-6 %
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	sink
			Rock or other impervious formations	none obs.

Lot Area 1/3 Ac. +

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"

Water Supply: Individual ( )
Public (✓)

Installed by Richard Albernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David Hinson DATE 7-15-81

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