09243

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 C. W. Brewer, Jr. DATE 11/18/88 Quad: PERMIT NO. 21C

PHONE: Business _____ Home 663-4669

LOCATION 1100 TL 1112 On L. 1st lot in Subdivision.

S. R. No. _____

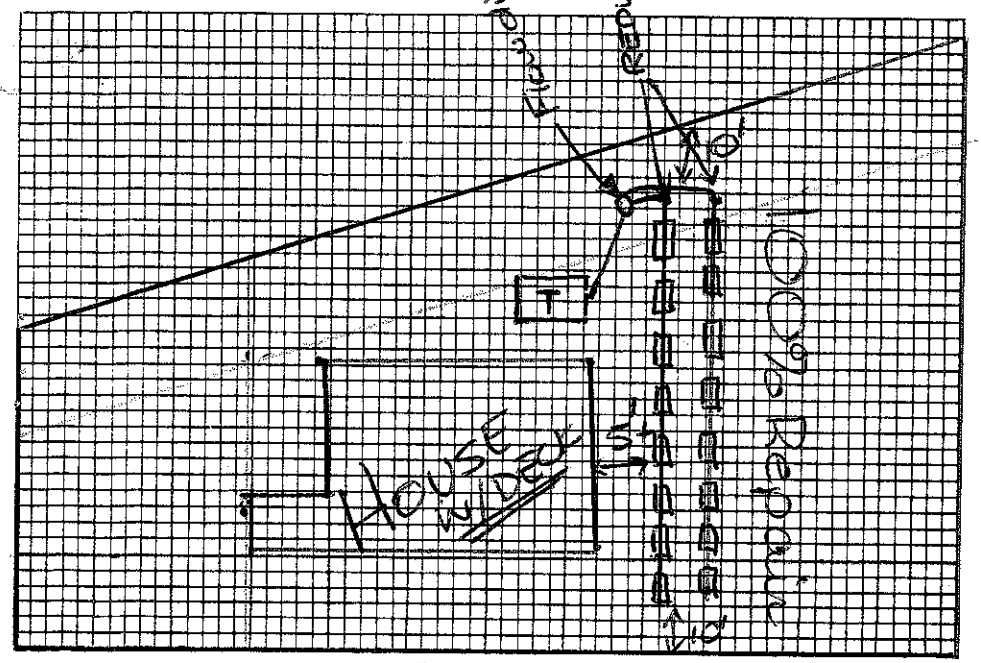
SUBDIVISION NAME Commodore Pen I LOT NO. 1 SECTION OR BLOCK NO. 2G-6-A-1

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.4 x 2½ gpd/ft²
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'+
Lot Area _____			Rock or other impervious formations	none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System NOT TO SCALE

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. _____ Linear Ft. 150' of T&J

Depth of Stone in Lines 16" panels.

Water Supply: Individual ( )

Public (✓)

Installed by _____

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

Signed: X C W Brewer Jr

IMPROVEMENTS PERMIT BY Andre C. Pierce

COMMENTS: Install in accordance w/ manufacturers instructions. Call H. D. if questions.

CERTIFICATE OF COMPLETION BY _____ 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