PIN# 4636-60-1606

11046

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 Aug 31, 1990 PERMIT NO. 26-6-A-10

PHONE: Business ______ Home ______

LOCATION 1100 TL Stutts TL 1212 TL Marlin Dr. On left

______ S. R. No. ______

SUBDIVISION NAME Commodore Peninsula LOT NO. 10 SECTION OR BLOCK NO. ______

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site ~~Suitable~~ PS Yes (✓) No ( )

Character & Porosity of Soil PS clay

Percolation Rate ~.3

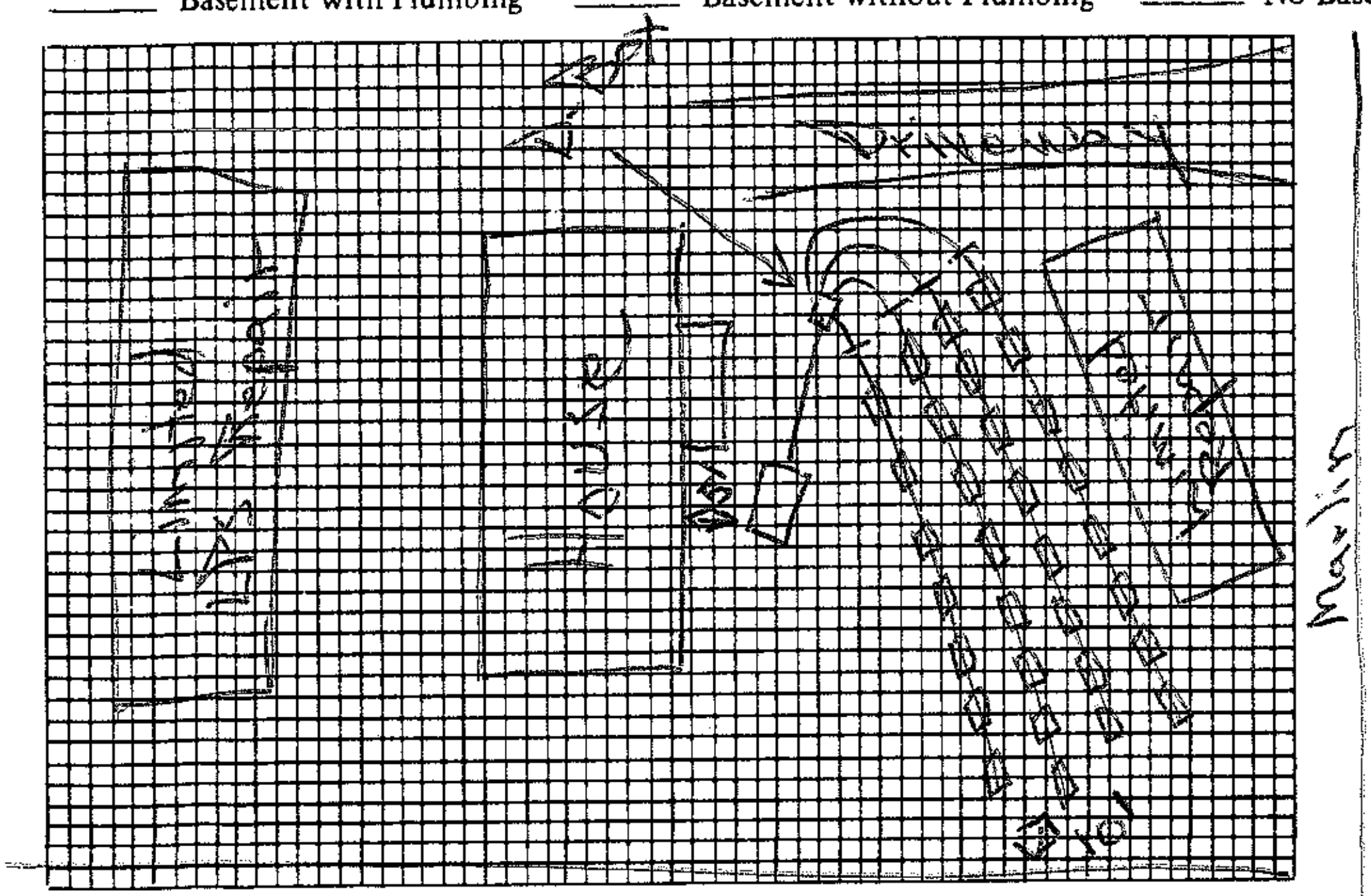
Topography 1-5%

Depth to Water Table +3'

Rock or other impervious formations none obs.

Lot Area ______

______ Basement with Plumbing ______ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 4

No. of Lines 4

Sq. Ft. ______ Linear Ft. 200'

Depth of Stone in Lines T&J

Water Supply: Individual ( ) 16"

Public (✓) Panel

Installed by C.W. Richard Abernathy

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

Signed: ______

IMPROVEMENTS PERMIT BY ______

COMMENTS: ______

CERTIFICATE OF COMPLETION BY Sam Ingram DATE 8/31/90

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