PIN# 4636-60-1742

12053

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 Darren Brewer DATE 6/11/91 PERMIT NO. 26-6-A-11

PHONE: Business _____ Home _____

LOCATION 1100 TL ON STUTTS TL ON COMMODORE (MIDDLE) TL ON MARLIN ON (L) NEAR END S. R. No. _____

SUBDIVISION NAME COMMODORE PENINSULA LOT NO. 11 SECTION OR BLOCK NO. _____

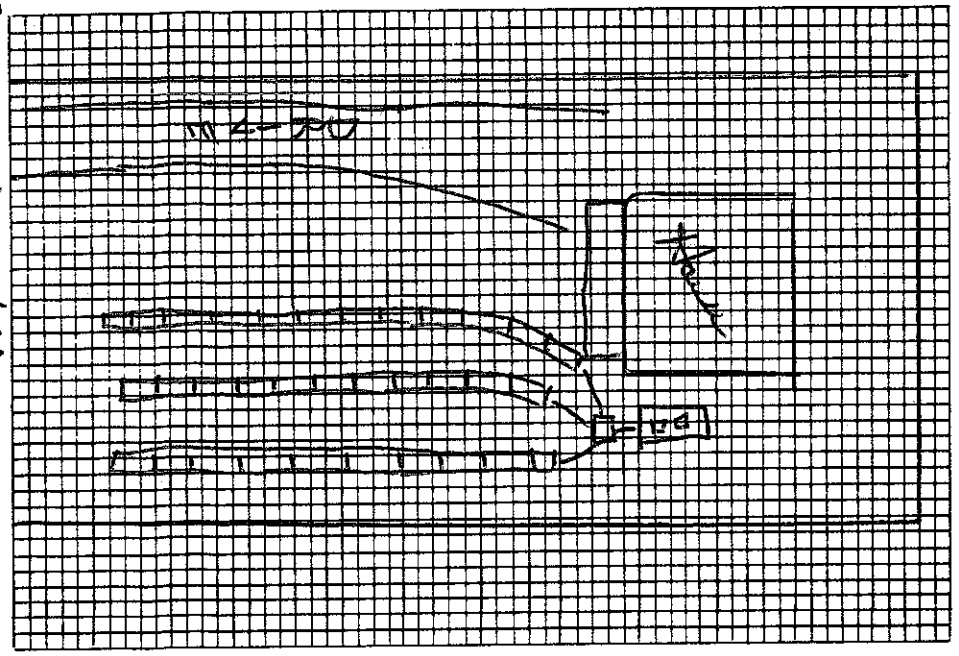
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	P - clay - (SF, 1,3)
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	2-47
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	>48"
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	None
			Rock or other impervious formations	

Lot Area 20,000 FT²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. — Linear Ft. 201

Depth of Stone in Lines N/R

Water Supply: Individual ( )
Public (✓)

Installed by 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 Wesley Sparks RS. DATE 6/11/91

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