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IREDELL COUNTY HEALTH DEPARTMENT

10962 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Concordia Const. DATE April 25, 1990 PERMIT NO. 2K-18-A-8

PHONE: Business _____ Home _____

LOCATION 1100 TL 1179 TL into St. Andrews Village w/ 2 way on left S. R. No. _____

SUBDIVISION NAME St. Andrews Village LOT NO. 8 SECTION OR BLOCK NO. _____

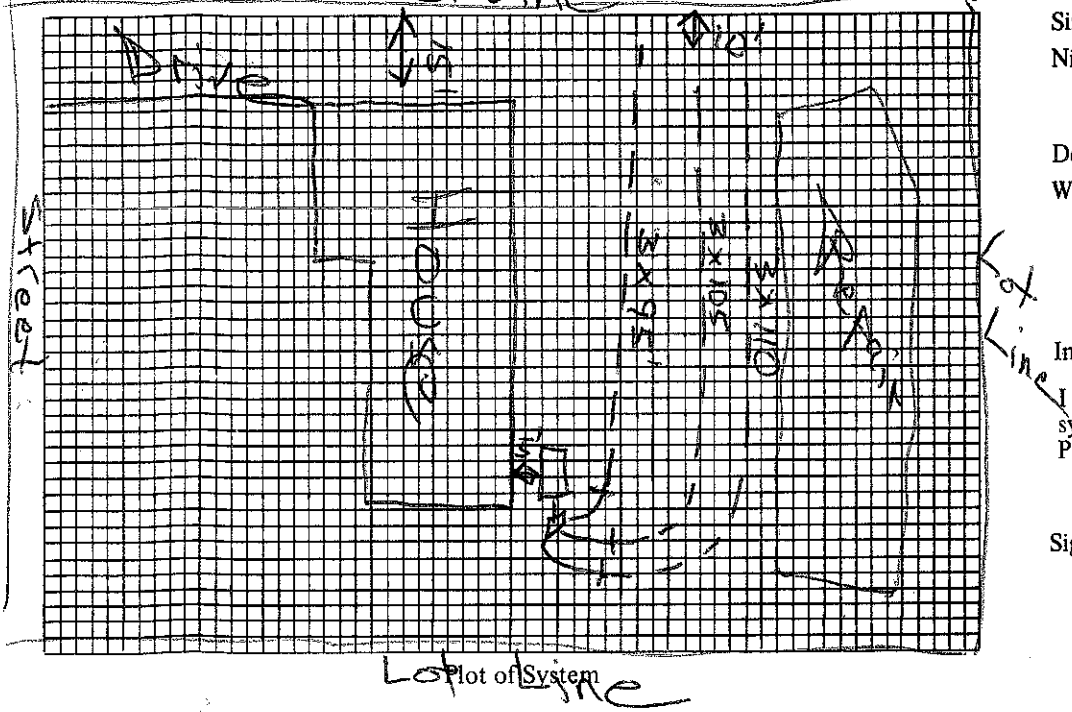
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Fs clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	35 2
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4'+
Site ~~Suitable~~ TS	Yes (✓)	No ( )	Depth to Water Table	none obs
			Rock or other impervious formations	

Lot Area 20,000 sq ft

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual ~~(✓)~~
Public (✓)

Installed by C.W. Rowan Septic Ser.

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

Signed: _____

IMPROVEMENTS PERMIT BY PRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Sam Ingram C.H.S. DATE Apr. 25, 1990

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