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IREDELL COUNTY HEALTH DEPARTMENT

11741

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

OWNER OR CONTRACTOR James Scott Glover DATE Nov. 7, '90 PERMIT NO. 25-5-A-85

PHONE: Business _____ Home _____

LOCATION 1303 N. TL 1300 (Fern Hill) TL 2nd Broadview Loop
3rd house on right

S. R. No. _____

SUBDIVISION NAME CLAY LOT NO. 85 SECTION OR BLOCK NO. 15

DW

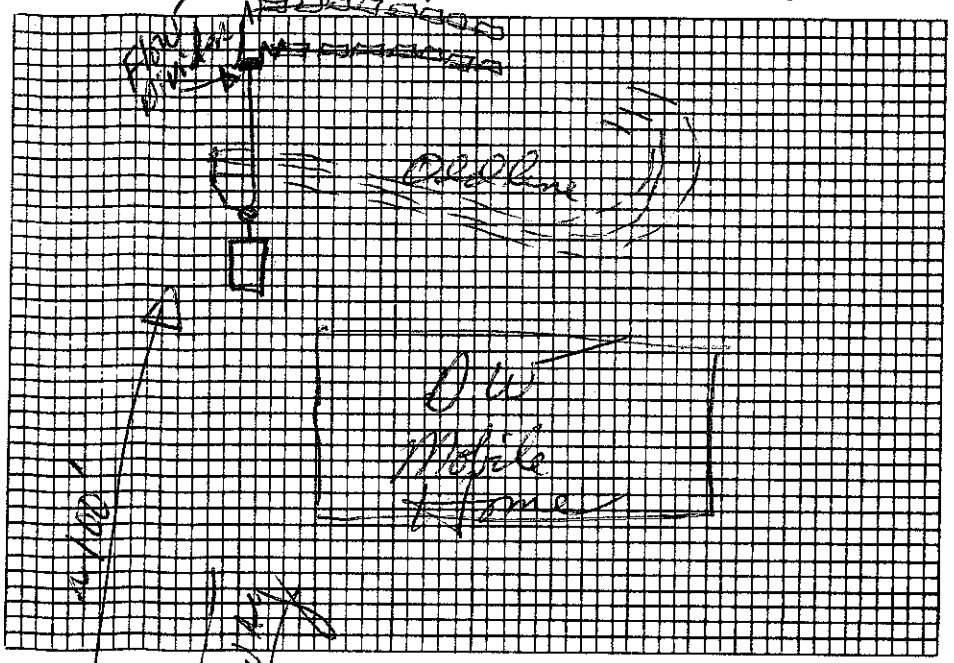
House ( ) Mobile Home (✓) Business ( ) Other Replacing single wide MH w/ DW Mobile Home

No. Bedrooms 3 No. Bathrooms 2 LAKE upgrading sewage syst

Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site ~~Suitable~~ PS Yes (✓) No ( )
Lot Area _____

Character & Porosity of Soil sandy clay
Percolation Rate 4-4
Topography 2-4p
Depth to Water Table 44
Rock or other impervious formations none to

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. _____ Linear Ft. 70' ea
Depth of Stone in Lines 16" & 24"
Water Supply: Individual (✓) panels
Public ( )

Installed by James Hudler

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

Signed: _____

IMPROVEMENTS PERMIT BY SCT

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 11-2-90

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