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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 Charles J. Borawa DATE July 20, 1988 PERMIT NO. _____

PHONE: Business 873-8032 Home _____

LOCATION Beth Rd. N. TL. Fern Hill Pass Periwinkle 2nd R. (Fairburn Dr. — unmarked) On R S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 995 SECTION OR BLOCK NO. 15

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

1st line 15ft behind house

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit	Yes (+)	No ( )
Auto. Dishwasher	Yes (+)	No ( )
Auto. Wash. Machine	Yes (+)	No ( )
Site Suitable	Yes (+)	No ( )

Character & Porosity of Soil clay

Percolation Rate 4

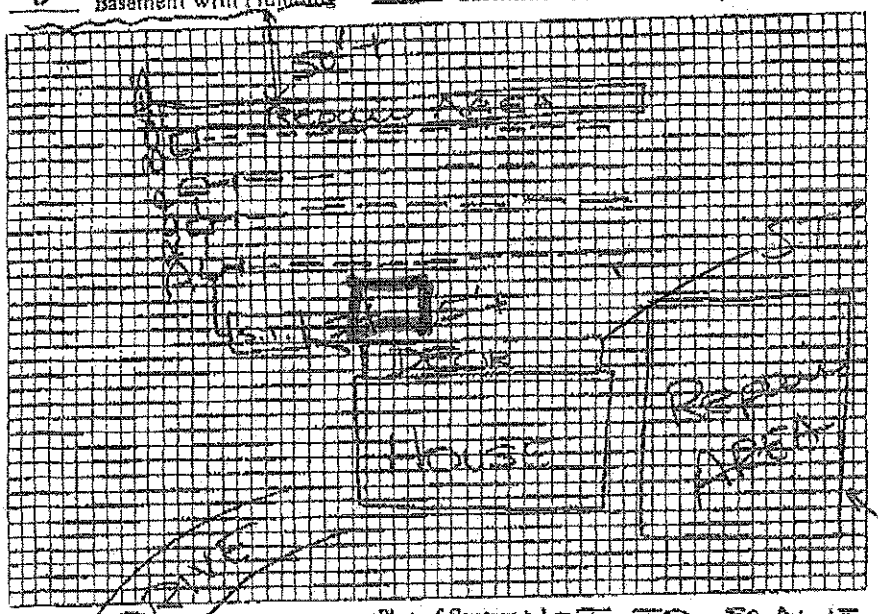
Topography ~ 20% 4+

Depth to Water Table _____

Rock or other impervious formations none observed

Lot Area 1.9 ACRE LAKE

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System NOT TO SCALE

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 1200 Linear Ft. 400

Depth of Stone in Lines 12"

Water Supply: Individual (+)

Public ( )

Installed by _____

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

Signed: _____

12 x 25 well site

IMPROVEMENTS PERMIT BY ACP

COMMENTS: _____

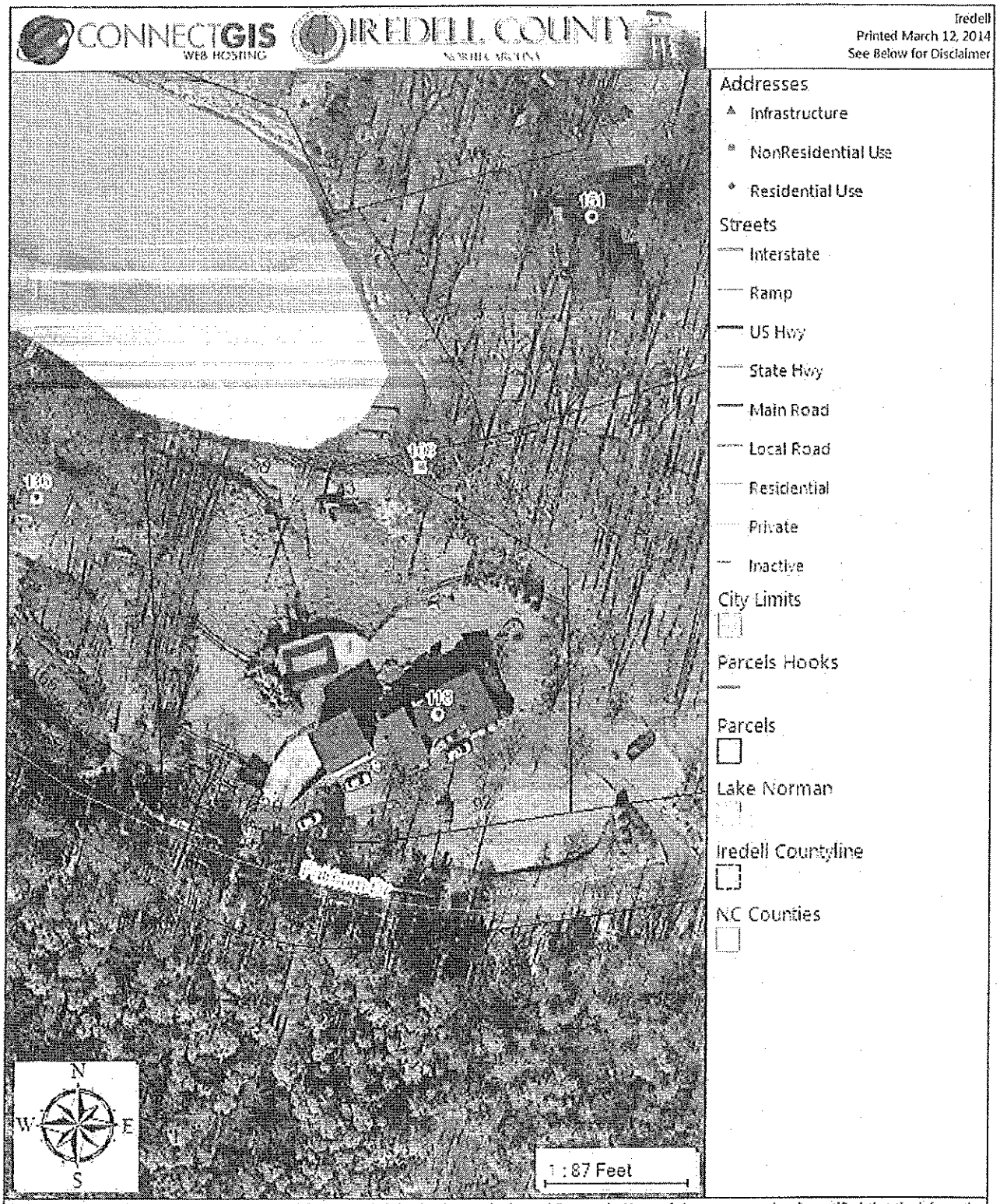
CERTIFICATE OF COMPLETION BY Audrey C. Pierce DATE 7/20/88

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



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