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 Robert L. Swinney DATE 9-16-83 PERMIT NO. 319

PHONE: Business _____ Home _____

LOCATION 150 W JR 1396 R 1st dirt street near end 1L dirt Road on R S. R. No. _____

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

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

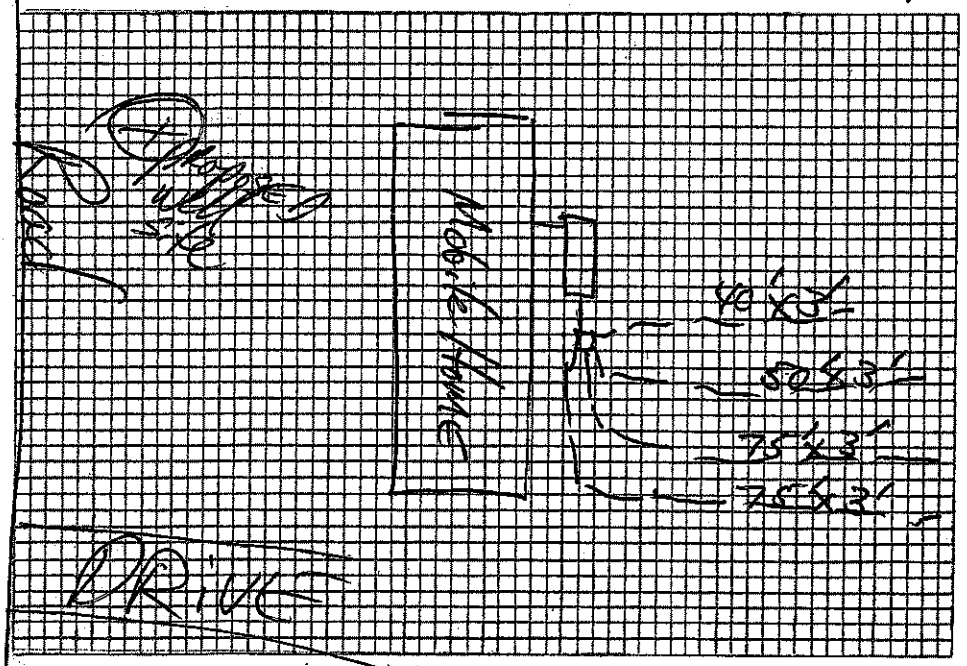
No. Bedrooms 2-3 No. Bathrooms 1-2

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

Lot Area ~20,000 Ac

Character & Porosity of Soil Clay loam 0.5 GPM ff/day
Percolation Rate 6-8 Min/in
Topography Flat
Depth to Water Table None observed
Rock or other impervious formations

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 720 Linear Ft. 240'
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )
Installed by Glenn Grove Septic John Barhandt

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

Signed: _____

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 9-16-83
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