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IREDELL COUNTY HEALTH DEPARTMENT 4649068444

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

OWNER OR CONTRACTOR S & L Properties DATE March 1, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 w TR 1303 N, (Perth Rd.) TR [illegible] just before jct. with 1300 a 1/8 mile on Rt S. R. No. _____

SUBDIVISION NAME S & S Properties LOT NO. 6 SECTION OR BLOCK NO. _____

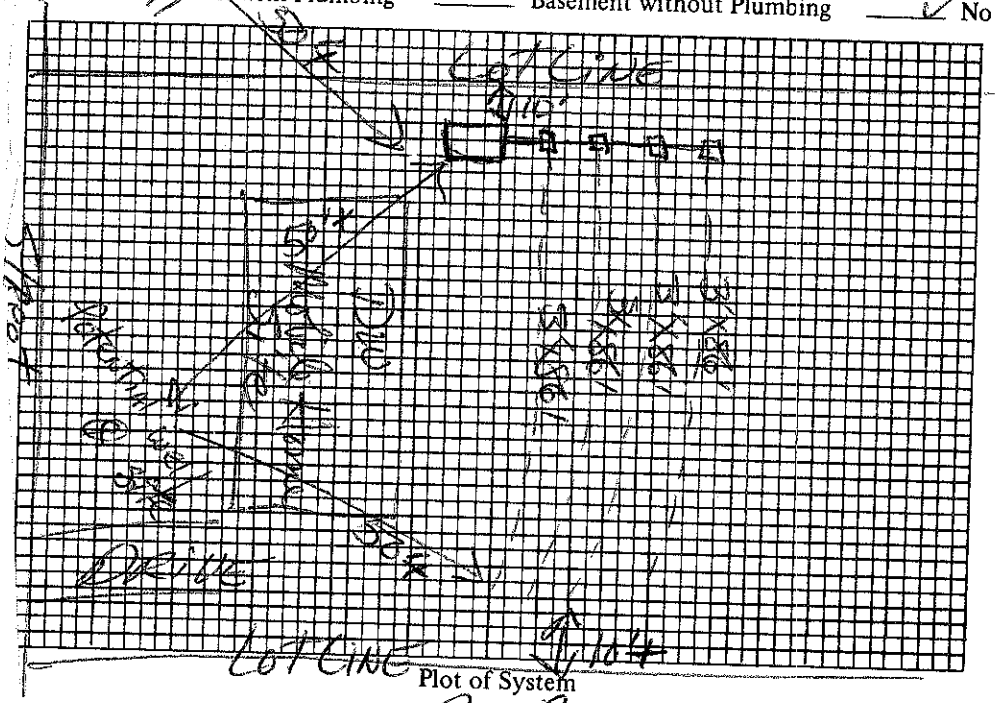
O.W.

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	435
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	10-15%
Site Suitable PS.	Yes (✓)	No ( )	Depth to Water Table	4ft
Lot Area 20000 ft² +			Rock or other impervious formations	none obs.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1032 Linear Ft. 344
Depth of Stone in Lines 12"

Water Supply: Individual (✓) (next door?)
Public ( )

Installed by Albert Bartlett

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

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: Well not down on site.

CERTIFICATE OF COMPLETION BY [signature], RS. DATE 3-1-88

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

mit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making
provements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold