0818

IREDELL COUNTY HEALTH DEPARTMENT 4649164743

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

OWNER OR CONTRACTOR L & S Properties DATE July 6, 88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303 N. TR Knotty Pine Lane (just before jct with 1308) at end on left S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 16 SECTION OR BLOCK NO. _____

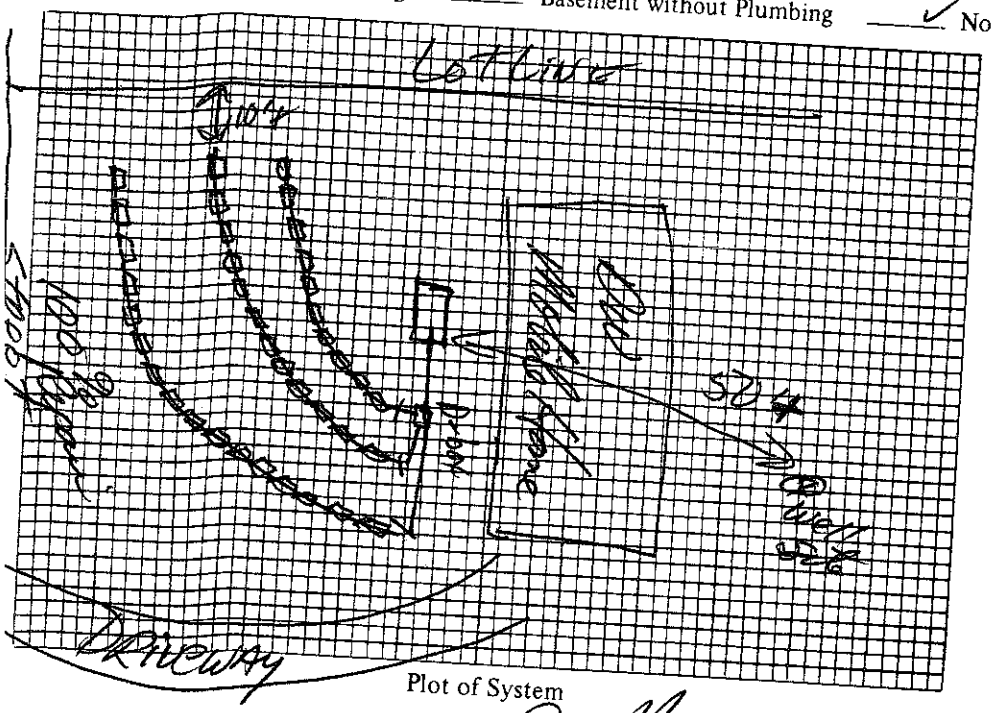
D.W.

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	2.3
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4 BD
Site ~~Suitable~~	Yes (✓)	No ( )	Depth to Water Table	44
Lot Area 1/2 AC.			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 3
Sq. Ft. _____ Linear Ft. 200'
Depth of Stone in Lines 16" T&M

Water Supply: Individual (✓) panels
Public ( ) gravity flow

Installed by Delbert Bostian

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well not down.

CERTIFICATE OF COMPLETION BY _____ DATE 7-6-88

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