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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 Donald Krueger DATE 11-19-84 PERMIT NO. 426

PHONE: Business _____ Home _____

LOCATION 155 TL 136 TL 1st [redacted] ENTRANCE
1st house, on R

S. R. No. _____

SUBDIVISION NAME Fremont Park LOT NO. 125 SECTION OR BLOCK NO. _____

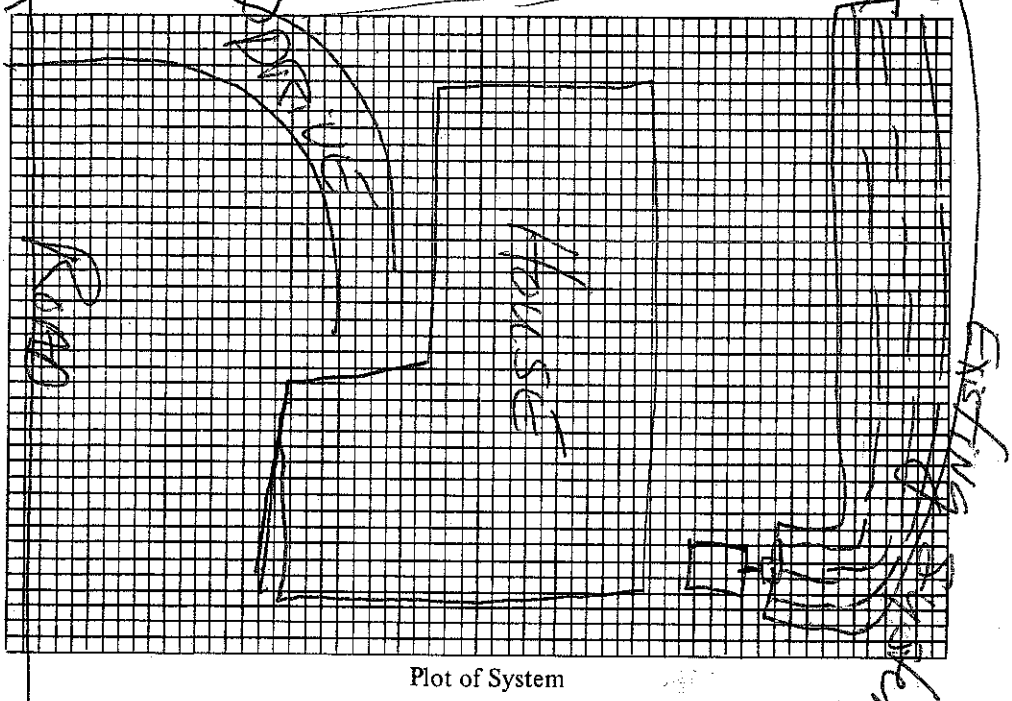
House (X) Mobile Home ( ) Business ( ) Other Adding GARAGE (No plumbing)

No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil _____
Percolation Rate _____
Topography EXISTING
Depth to Water Table System
Rock or other impervious formations _____

~~Basement with Plumbing~~ ~~Basement without Plumbing~~ No Basement



Plot of System

Size of Tank EXISTING Gals.
Nitrification Field:
No. of Lines EXISTING
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public (X)

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing System working OK At date of inspection, Don't drive over system

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 11-19-84

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