IREDELL COUNTY HEALTH DEPARTMENT 4655235097

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

OWNER OR CONTRACTOR Fred Baldwin, Jr. DATE 4-1-85 PERMIT NO. 114

PHONE: Business _____ Home _____

LOCATION 1155 TL 1223 TR 1224 NEAR END ON left S. R. No. _____

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

House ( ) Mobile Home (X) Business ( ) Other Replacing Existing Single with New Double Wide

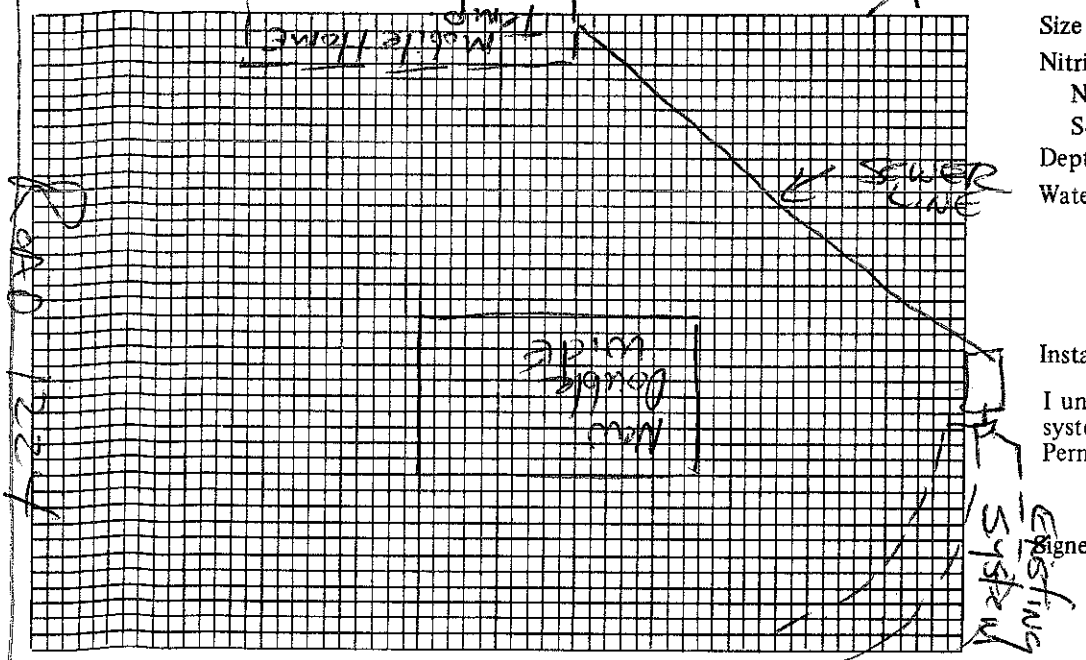
No. Bedrooms 3 No. Bathrooms 2

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

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

Lot Area Existing

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Existing
Size of Tank 1000 Gals.
Nitrification Field: 3 Existing
No. of Lines
Sq. Ft. 120 Linear Ft. 240
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

3-22-83
Installed by J.R. Bowlles

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

Signed: _____

System Checked by Fred Clemmer 3-22-83

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Existing System working OK at date of inspection; OWNER to Remove existing Single wide from Sewage System before final power approval

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 4-1-85

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