IREDELL COUNTY HEALTH DEPARTMENT 4655283849

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

OWNER OR CONTRACTOR Diane W. Childress DATE 12-9-83 PERMIT NO. 421

PHONE: Business _____ Home _____

LOCATION 1155 J. F. Keith Road (1136) Rt 1262 9th on R Brown Spotted

SUBDIVISION NAME Fremont Park LOT NO. 136 SECTION OR BLOCK NO. _____ S. R. No. _____

House ( ) Mobile Home ( ) Business ( ) Other Adding garage No plumbing

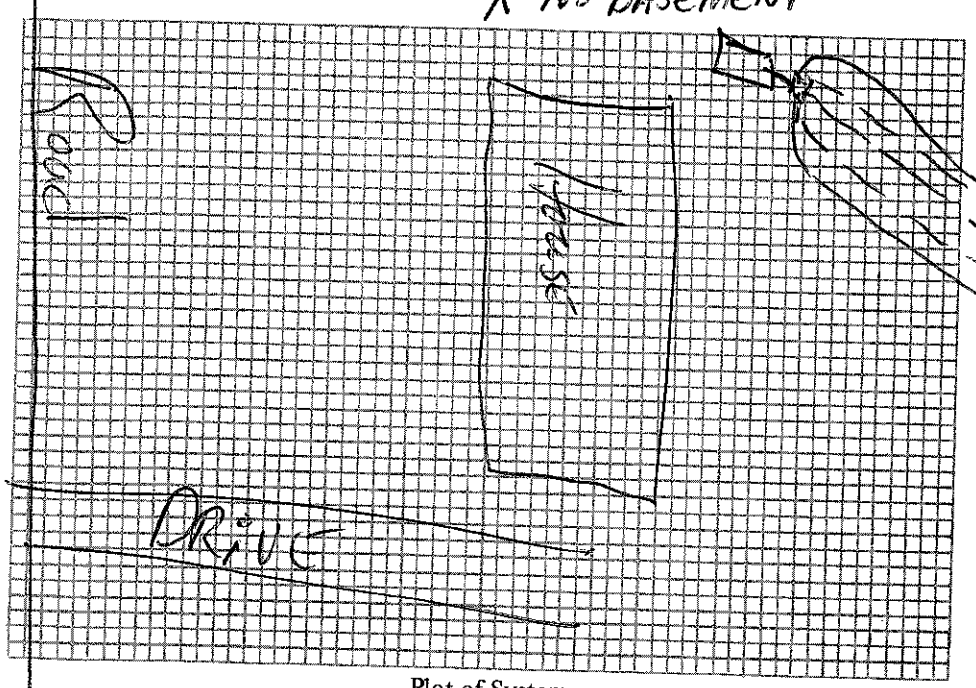
No. Bedrooms 3 No. Bathrooms 1

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

Lot Area Existing

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

X 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 New Owner

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

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmons DATE 12-9-83

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