IREDELL COUNTY HEALTH DEPARTMENT

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

R CONTRACTOR James Cross DATE 7-8-85 PERMIT NO. 238

Business Home

ON 1135 1155 ON left ACROSS from WATERLYNN Road S. R. No.

DIVISION NAME LOT NO. SECTION OR BLOCK NO.

ouse (X) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms 3 No. Bathrooms 1½ Character & Porosity of Soil

Garbage Disposal Unit Yes ( ) No (X) Percolation Rate

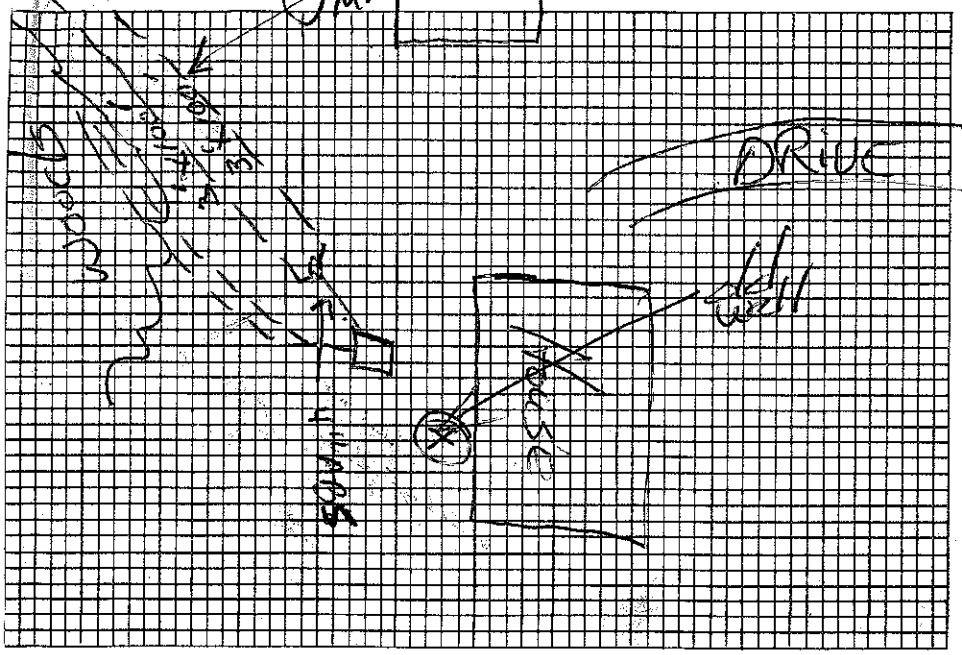
Auto. Dishwasher Yes ( ) No (X) Topography EXISTING

Auto. Wash. Machine Yes (X) No ( ) Depth to Water Table System

Site Suitable Yes (X) No ( ) Rock or other impervious formations

Lot Area EXISTING 50' MIN CARPORT

Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement (X)



Plot of System

Size of Tank EXISTING Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (X)
Public ( )

Installed by

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

Signed: James D. Cross

IMPROVEMENTS PERMIT BY Paul Clemmer

COMMENTS: Pump tank; check tank for ½ additional old well; backfill w/ clean clay

CERTIFICATE OF COMPLETION BY DATE

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