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 Julia C. Carpenter DATE 4/11-85 PERMIT NO. 139

PHONE: Business _____ Home _____

LOCATION 1125 S. R. Springtime Lane on left before 151 Road S. R. No. _____

SUBDIVISION NAME Tanbarrows LOT NO. 71 SECTION OR BLOCK NO. _____

House ( ) Mobile Home XX Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 20,000 FT2

Character & Porosity of Soil Clay 2 Clay

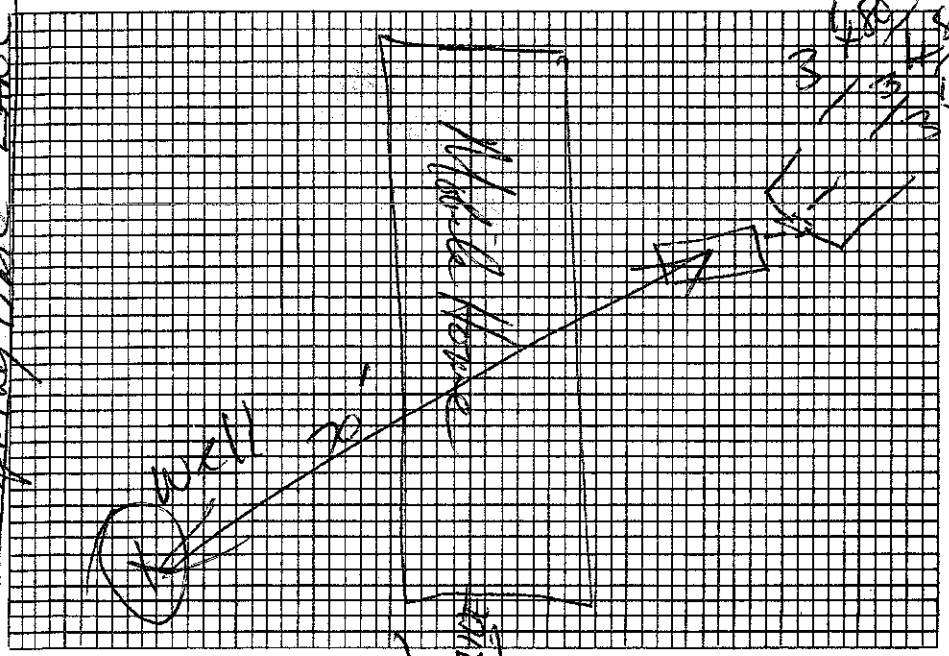
Percolation Rate 0-30 MPI

Topography 2% - 4%

Depth to Water Table _____

Rock or other impervious formations None obs

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 3

No. of Lines _____

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual XX

Public ( )

Lincoln Co.

Installed by Larry Rep

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

Signed: _____

IMPROVEMENTS PERMIT BY: Fred Clemmer

COMMENTS: ROAD

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 4-11-85

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