4669-68-6381

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 Earnest Crymes DATE 5-1-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 801 N SR 2362 (Triplett Rd.) SR 2379 (Winlow Cr.)
on Rt before creek (at end of street) S. R. No. _____

SUBDIVISION NAME DIRTY MO ACRES LOT NO. 1 SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other _____

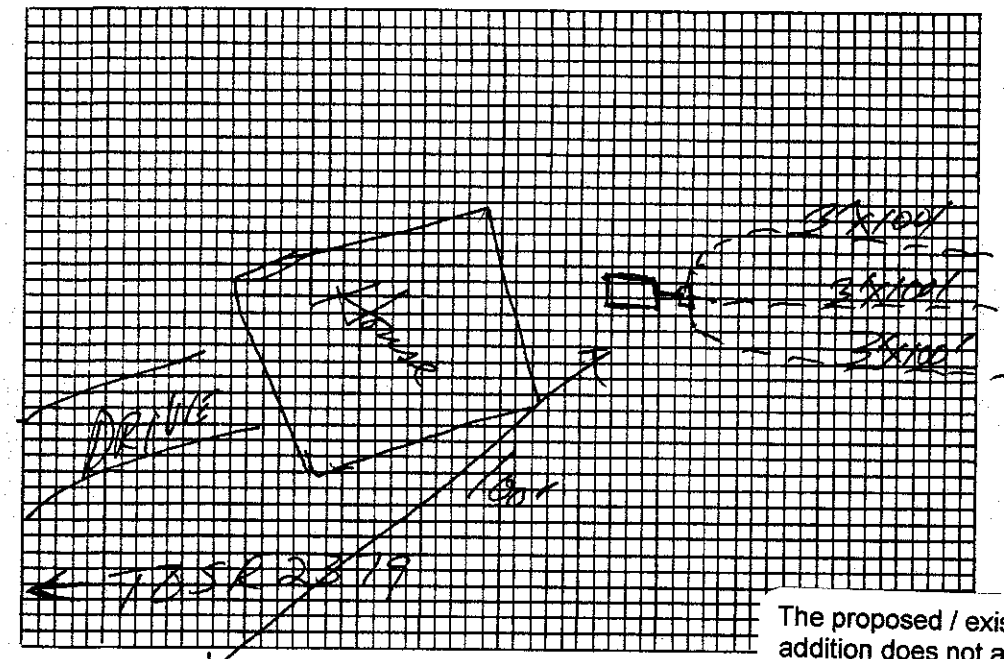
No. Bedrooms 3 No. Bathrooms 2½

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

Lot Area 12Ac

Character & Porosity of Soil clay - pm
Percolation Rate N.T.
Topography 4-10%
Depth to Water Table 4ft
Rock or other impervious formations none obs

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Smith Builders

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

Signed: _____

The proposed / existing GARAGE addition does not appear to impact the existing septic system.
**NOTE: GOING IN FRONT OF HOUSE

IMPROVEMENTS PERMIT BY _____ R.S.
Date: 5-2-90
ICHD-Environmental Health Division

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 5-1-87

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