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 Gary Howard DATE 7-10-85 PERMIT NO. 309

PHONE: Business _____ Home _____

LOCATION 1465 to 1142 (Johnson Dairy Farm) ½ mile to Carolwoods to Laurel

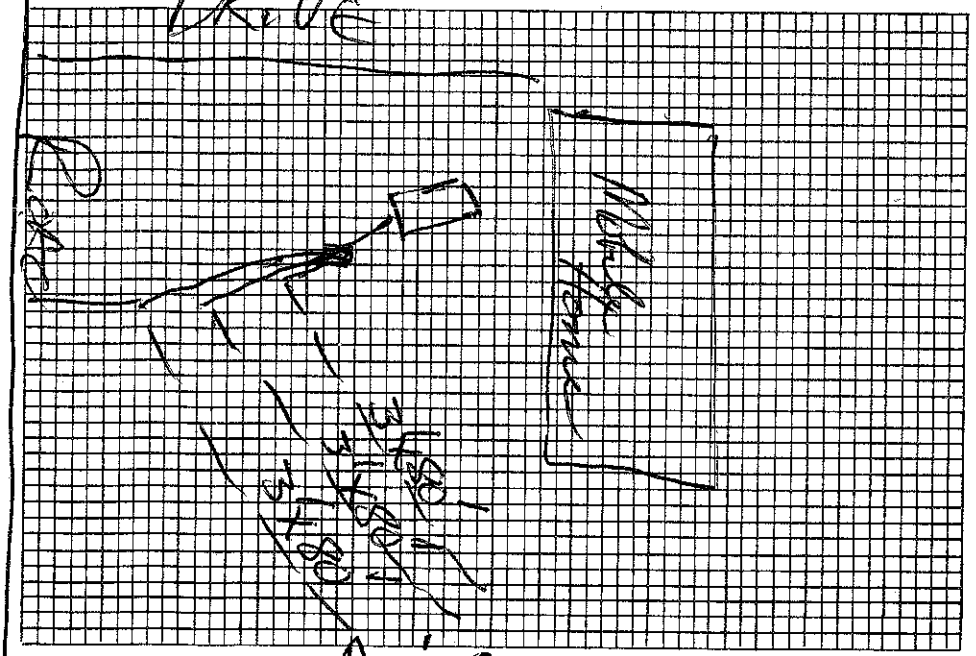
SUBDIVISION NAME Carolwoods LOT NO. 24 PHS 7 lots on left SECTION OR BLOCK NO. 4 S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.5 gpf
Auto. Wash. Machine	Yes (X)	No ( )	Topography	Level
Site Suitable	Yes (X)	No ( )	Depth to Water Table	_____
Lot Area 1.0 ACRE			Rock or other impervious formations	NONE obs.

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual X
Public ( )
Charlotte

Installed by L.H. Landscaping

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

Signed: _____

IMPROVEMENTS PERMIT BY C.K. Bennett

COMMENTS: Well not down yet

CERTIFICATE OF COMPLETION BY Jack Alexander DATE 7-10-85

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