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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 Charles Stephens DATE Feb. 21, 1990 PERMIT NO. 16-A-90

PHONE: Business _____ Home 663-5656

LOCATION 152 TR1151 Teeter Rd. 4th driveway on right Past gray house 2nd trailer S. R. No. _____

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

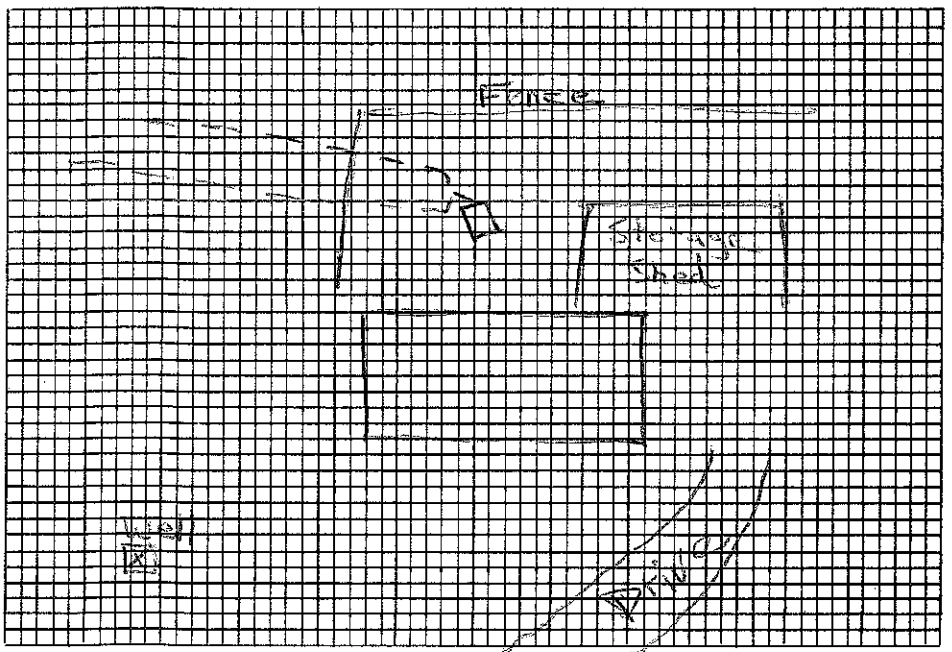
House ( ) Mobile Home (✓) Business ( ) Other Ex. sys.

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes	( )	No	(✓)	Character & Porosity of Soil —
Auto. Dishwasher	Yes	(✓)	No	( )	Percolation Rate —
Auto. Wash. Machine	Yes	(✓)	No	( )	Topography —
Site Suitable	Yes	( )	No	( )	Depth to Water Table —
					Rock or other impervious formations —

Lot Area .82 ac

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines —
Sq. Ft. _____ Linear Ft. —
Depth of Stone in Lines —

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed Charles M. Stephens

IMPROVEMENTS PERMIT BY _____

COMMENTS: Replacing 2 Bdr. trailer with 2 Bdr.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Sam Chapman 6748 DATE Feb. 21, 1990

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