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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 Gary Oliphant DATE May 31, 1990 PERMIT NO. 4C-A-70

PHONE: Business _____ Home _____

LOCATION 115 N TR 150, TL 801 TR Sloop Rd. ~ 1/4 mi on left Drive to left of 3 mailboxes S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 70 SECTION OR BLOCK NO. _____

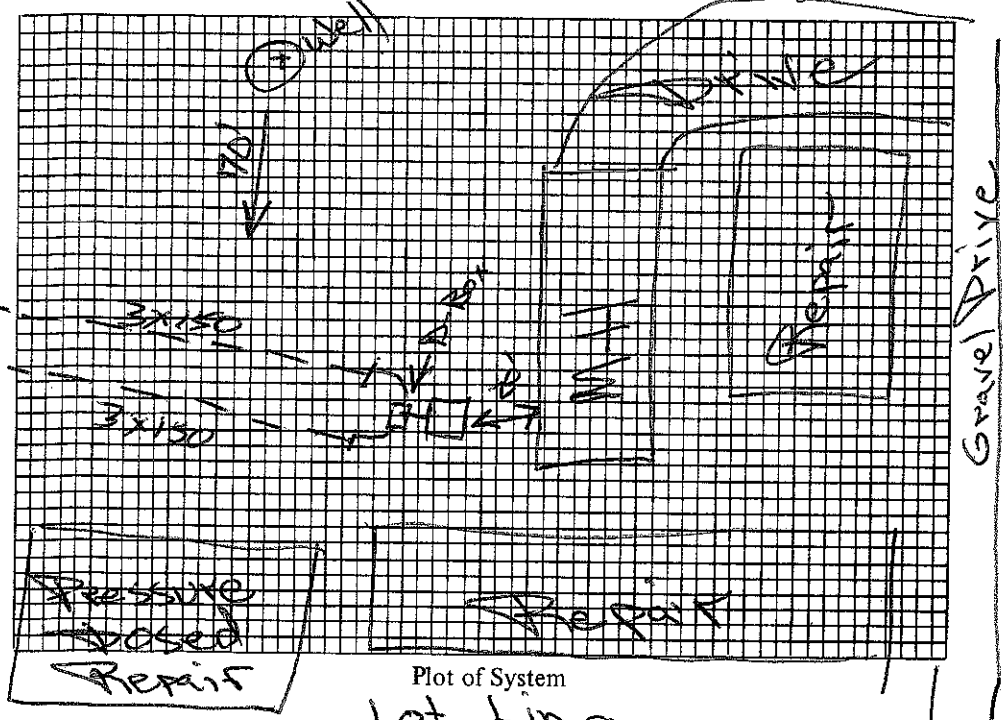
House (✓) Mobile Home (✓) Business ( ) Other ~~SD~~

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	WNL
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	5-10%
Site ~~Suitable~~ OS	Yes (✓)	No ( )	Depth to Water Table	+ 3'
			Rock or other impervious formations	none obs

Lot Area 2.758 ac

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 900 Linear Ft. 300'
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Tim Smith

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Sam Ingram Loop Rd. DATE 5/31/90

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