03373

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 GLENN SIGMON DATE 2-24-85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Eufola Rd. off 64-70 west - go on access creek - approx. ½ mi. up hill + T.R. into dirt st. - MH back off rd. S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 1-2 Character & Porosity of Soil Prev. Suitable

Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate 1 Spl./sq.ft.

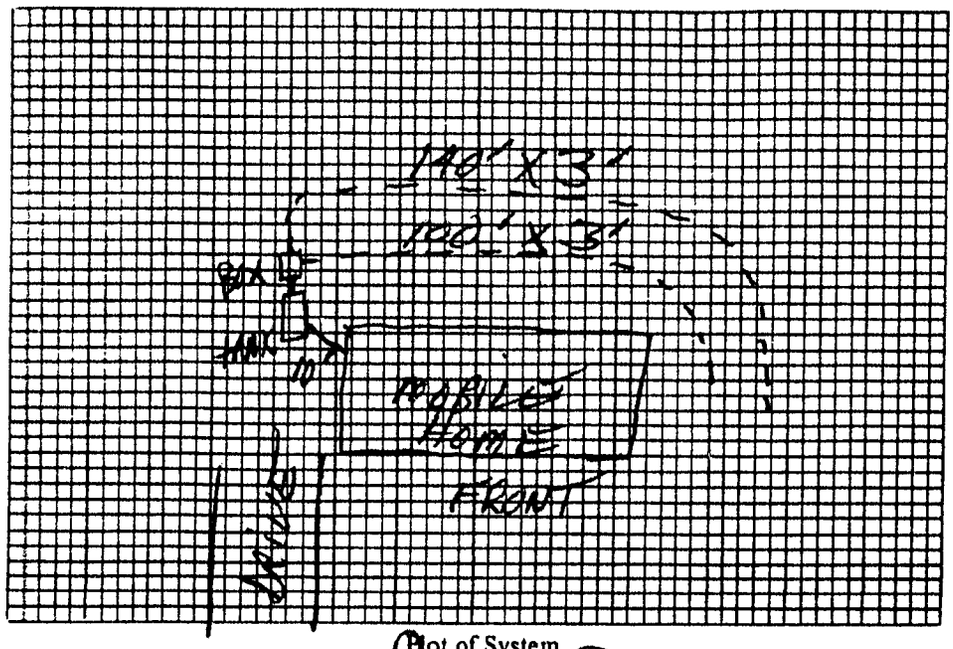
Auto. Dishwasher Yes ( ) No (✓) Topography 2-6%

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 10'+

Site Suitable Yes (✓) No ( ) Rock or other impervious formations none observed.

Lot Area 20,000 sq. ft. +

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Jones Hudler

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 7-24-85

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