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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)

DATE 6/8/88 PERMIT NO. _____

OWNER OR CONTRACTOR Kenneth Waugh Home _____

PHONE: Business _____ S. R. No. _____

LOCATION 40W, Lf on Old Mountain, Rt on Beulah Church, Lf on Mock Mill, ≈ 0.8 mile on Rt

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

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

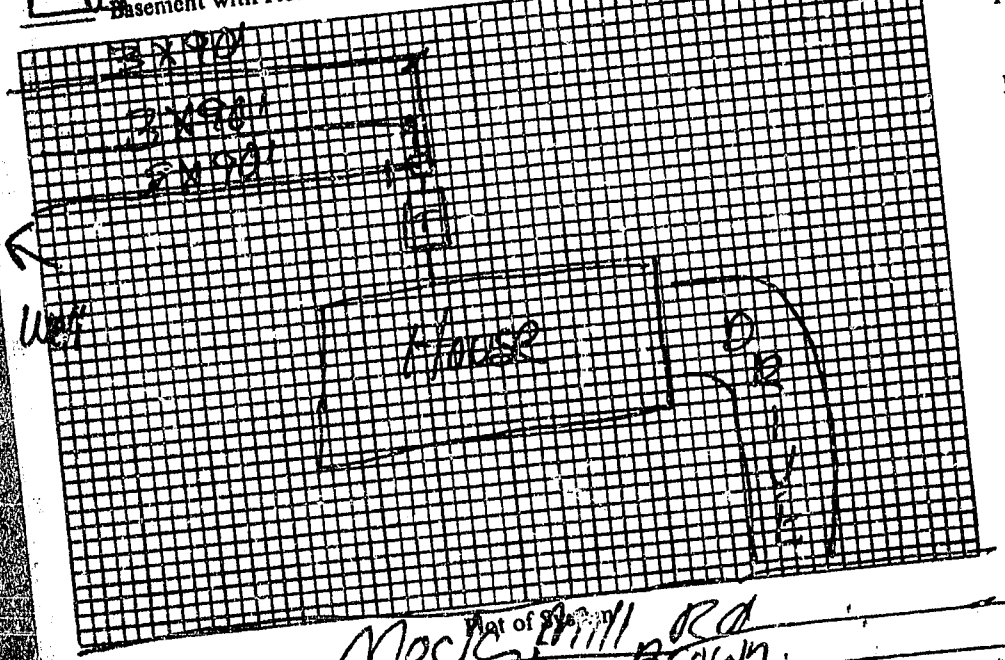
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil clayey
Percolation Rate 0.4 / 1
Topography 2-6 %
Depth to Water Table 10'+
Rock or other impervious formations None Noted

Site Suitable
Lot Size 4.3 acres

Basement with Plumbing ____ Basement without Plumbing ____ No Basement ✓



Plat of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 810 Linear Ft. 270'
Depth of Stone in Lines 12"
Water Supply: Individual ✓ on Site
Public ( )

Installed by Wes Lytton

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

Signed: _____

IMPROVEMENTS PERMIT BY Mock Mill Rd Steve Brown.

COMMENTS: Permit had expired but relayout approved by KRS. Installer informed on expiration date of permits. Do not drive over septic tank lines.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 6/28/88

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