03557

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 BOB HARTNESS DATE 11-12-85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64-Dwest 3/4 mi. past white oaks - T.L. on Shady Rest Lane - T.R. on dirt st. below trans. MHP - 1/4 mi. on left.

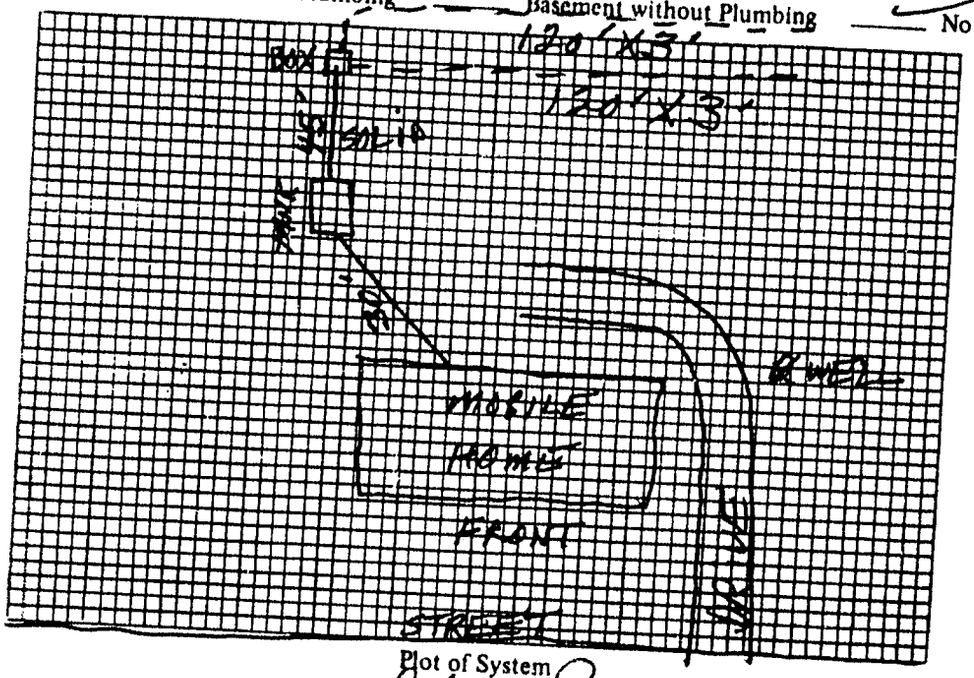
SUBDIVISION NAME SHADY REST ACRES III LOT NO. 12 & 13 SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 2 No. Bathrooms 1.5

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil Sandy Suitable
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate 5 min. / 1 in.
Auto. Wash. Machine	Yes (✓)	No ( )	Topography 2 to 10
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 10'+
Lot Area Ample			Rock or other impervious formations none observed

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field: 2

No. of Lines _____

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by James 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

EXISTING SYSTEM CHECKED BY: _____ DATE 11-12-85.

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE _____

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