1590.

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 WILLARD AUTON DATE 6-22-92 PERMIT NO. EJ-A-87Pt.

PHONE: Business _____ Home _____

LOCATION Hwy 70 W past Turnersburg - T.L. on Shady Rest Rd - T.R. on Sugarwood Dr. 2nd House on left

S. R. No. _____

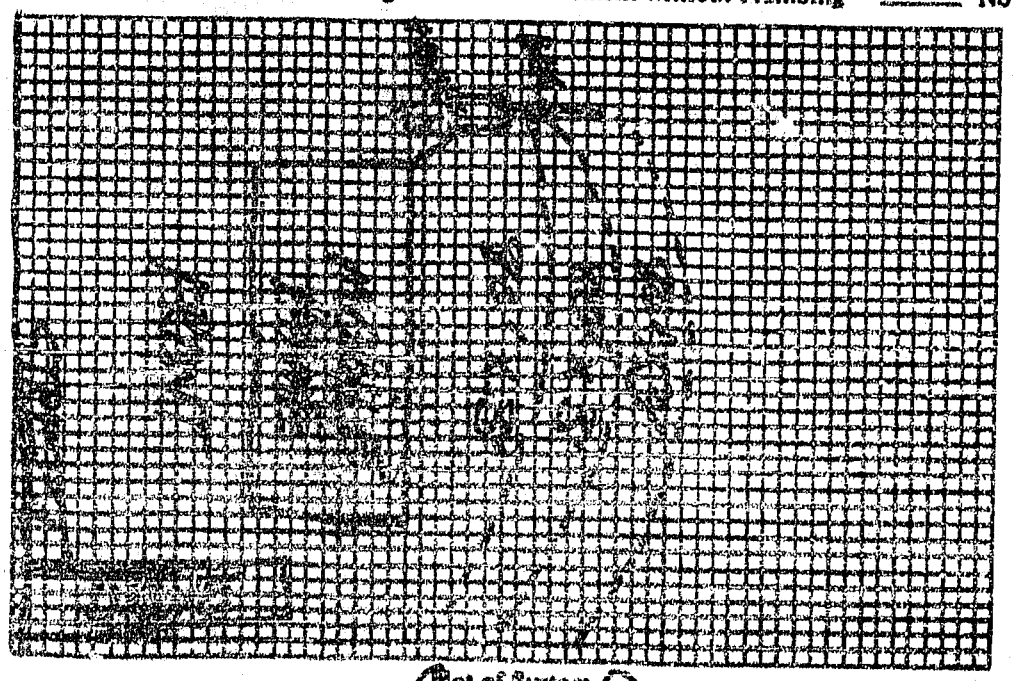
SUBDIVISION NAME HAWKS SUBD. LOT NO. 8 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Prev. Suitable.	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	1" in 5 min.	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	12'+	
Lot Area 29352 sq. ft.			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:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by Kenny Pearson

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

Signed: _____

IMPROVEMENTS PERMIT BY Paul Brown

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Paul Brown DATE 6-22-92

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