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 Ronnie Ladish DATE 8-2-89 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Lewis Farm Rd. off Old Nts. Rd. - go approx. 1.25 mi. on left.

SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____

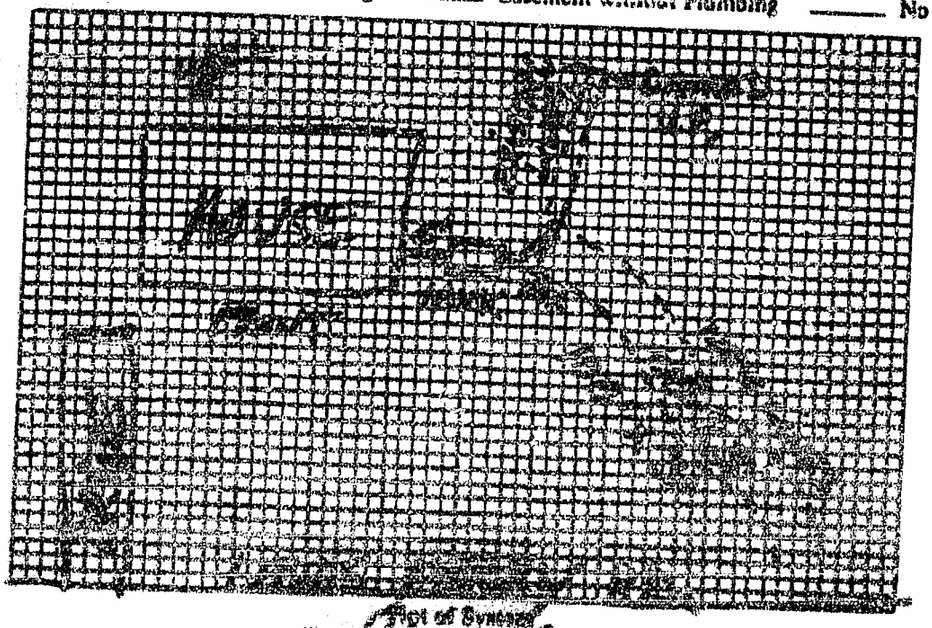
SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	
Auto. Wash. Machine	Yes ( )	No ( )	Topography	
Site Suitable	Yes ( )	No ( )	Depth to Water Table	EXISTING.
Lot Adequate			Rock or other Impervious formations	

( ) Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement



Size of Tank EXISTING Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 200 Lines Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public ( )

Installed by Cliffie Farmer

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY: Floyd Brown

COMMENTS: Old drain field dug up 10' back above + new septic tank for rabbit feed.

CERTIFICATE OF COMPLETION BY: Floyd Brown

EXISTING SYSTEM CHECKED BY: _____ DATE 8-2-89

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