09562

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 HELEN JOHNSON DATE 3-17-89 PERMIT NO. 14A

PHONE: Business _____ Home _____

LOCATION Iredell Rd. to Williamson Rd. - go onto Mocksville Rd. - 1st dwelling on left beside the Williamson Rd. sign - 2nd house

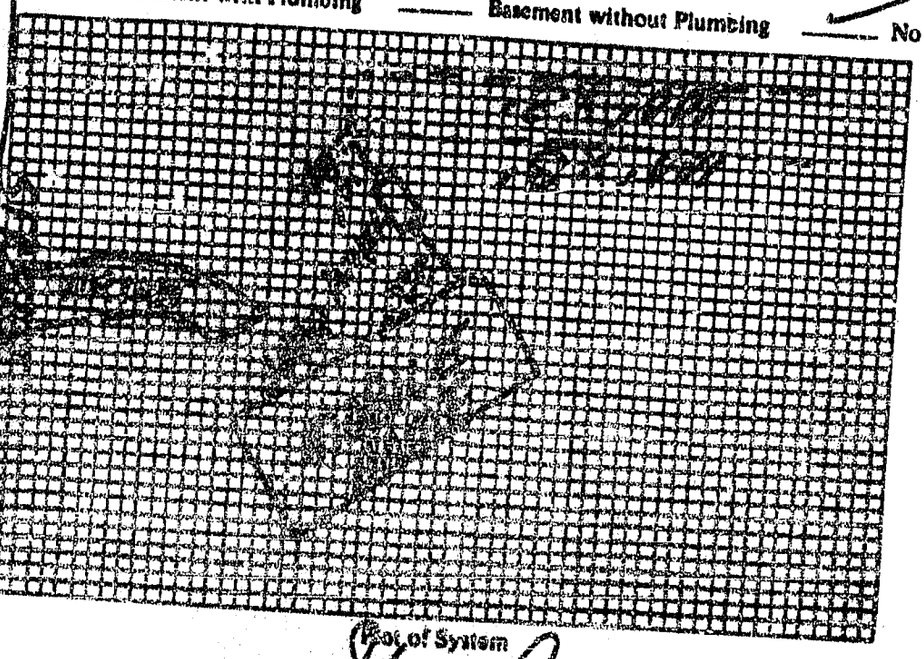
SUBDIVISION NAME STONEWOOD DEV. LOT NO. 35 S. R. No. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Poor Suitable.	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	Fast Slow	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level	
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



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 24
Water Supply: Individual ( )
Public (✓)

Installed by Jamie Hudler

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY: Steve Eaton

COMMENTS: _____

CERTIFICATE OF COMPLETION BY: Steve Eaton

EXISTING SYSTEM CHECKED BY: _____ DATE 3-17-89

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