3469

10202.

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 MARK FAIRCLOTH DATE 12-1-89 PERMIT NO. D9.

PHONE: Business _____ Home _____

LOCATION Old Mtz Rd. north of Bradford's X Rds. approx 3/4 mi on (R). Enter left - 1/4 mi on (R).

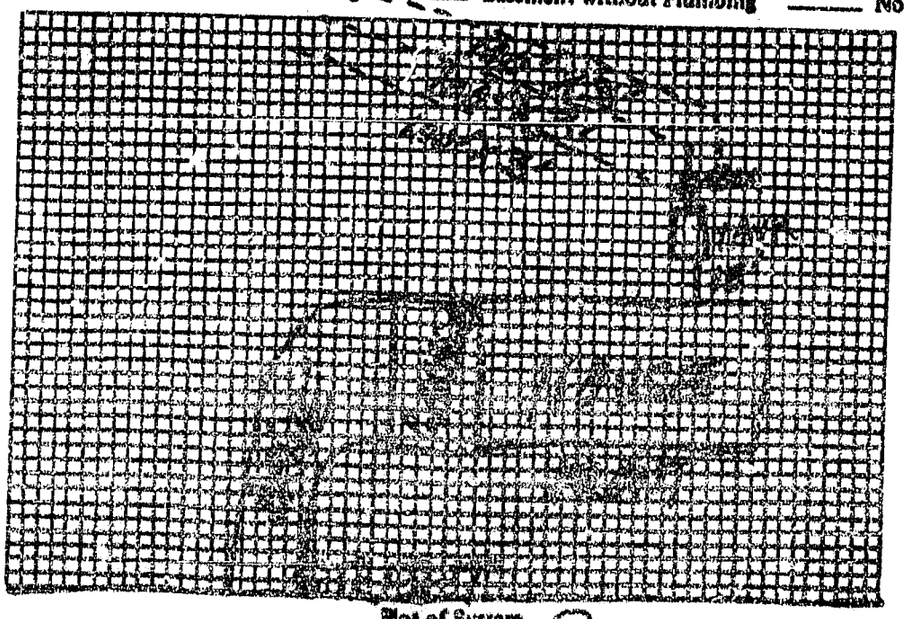
SUBDIVISION NAME NEVANDER FARM DEV. LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sandy Loam Suitable	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	5 min/in.	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10+ ft.	
Lot Area 5 acres.			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 3
Sq. Ft. 300 Lines @ 100 300
Depth of Stone in Lines 12
Water Supply: Individual ( )
Public (✓)

Plot of System

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 DATE 12-1-89

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