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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 Marvin Pearce DATE 8/24/84 PERMIT NO. _____

PHONE: Business _____ Home 876-0623

LOCATION Lippard Farm Rd off 90 W

SUBDIVISION NAME Happy Acres LOT NO. 10 S. R. No. _____ SECTION OR BLOCK NO. _____

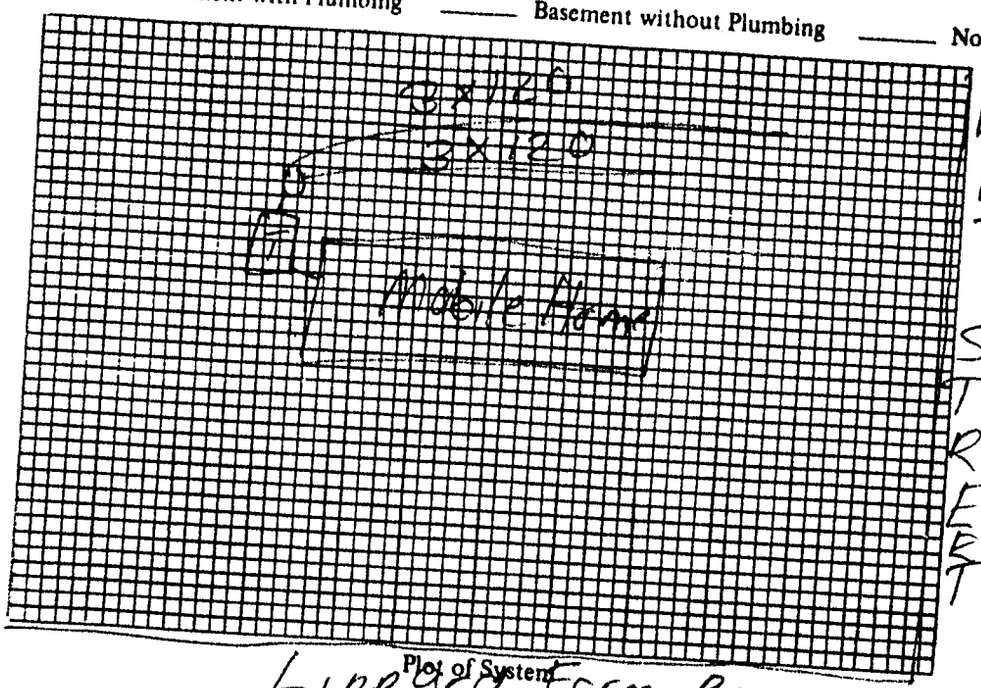
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil cl/ loam-cly
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate .5 gal/ft²/day
Auto. Wash. Machine	Yes (✓)	No ( )	Topography 2-4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 60'+

Lot Area 20,000 ft² Rock or other impervious formations None Noted

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

DIRT

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12

Water Supply: Individual ( )

Public (✓)

STREET

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly A. Shell

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Kelly A. Shell RS DATE 8/29/84

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