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 JOE MILSAPS DATE 9-5-85. PERMIT NO.

PHONE: Business Home

LOCATION Hwy 90 west - T.L. on Lippard Farm Rd. - 1st house on (R) past Proust Rd.

SUBDIVISION NAME LOT NO. S. R. No.

House (✓) Mobile Home ( ) Business ( ) Other Repair SECTION OR BLOCK NO.

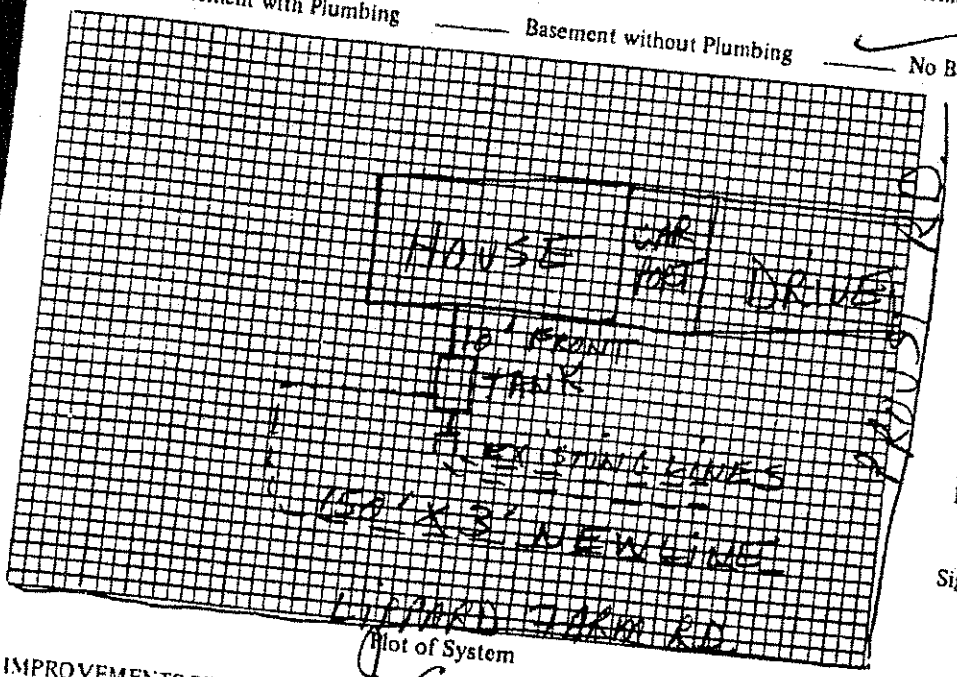
No. Bedrooms No. Bathrooms

Garbage Disposal Unit	Yes ( )	No ( )
Auto. Dishwasher	Yes ( )	No ( )
Auto. Wash. Machine	Yes ( )	No ( )
Site Suitable	Yes (✓)	No ( )

Lot Area Ample

Character & Porosity of Soil Clayey
Percolation Rate 4 gal/sq.ft.
Topography 2-6%
Depth to Water Table 10'+
Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field: 1
No. of Lines
Sq. Ft. 450 Linear Ft. 150
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Barry Sigmon

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

Signed:

IMPROVEMENTS PERMIT BY D. C. Moore

COMMENTS: Tank pumped + new tee set for new line. Check plumbing fixtures for leaks, etc.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 9-5-85.

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