09587.

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 ROBERT JOHNSON DATE 8-25-89 PERMIT NO. A 17.

PHONE: Business _____ Home _____

LOCATION Buffalo Shoals Rd west past Rufus Xing-Tl on Laurel Lane Rd. Cross over Lyttle Rd. Lot on Right, 1st house. S. R. No. _____

SUBDIVISION NAME LAUREL COVE REV. LOT NO. 3 & 4 SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Addition to existing house bldg.

No. Bedrooms — No. Bathrooms 1

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 Sandy Loam Suitable.

Percolation Rate 30 min/inch

Topography Gently Sloping

Depth to Water Table 10'

Rock or other impervious formations Not encountered

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 300 Lineal Ft. 150

Depth of Stone in Lines 6 SANS VINYL PANELS.

Water Supply: Individual (✓)

Public ( )

16" T&J PANEL SYSTEM.

Installed by Ground Level

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY: Greg Brown

COMMENTS: Septic tank system suitable for a 3 bedroom house with 2 baths.

DATE 8-25-89

CERTIFICATE OF COMPLETION BY Greg Brown DATE _____

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