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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 DAVID SHARP DATE 4-17-90 PERMIT NO. C14

PHONE: Business Home

LOCATION Buffalo Shoals Rd. west past Kyles Xing - T.R. on Backwell Ford - 1/2 blk on R.

SUBDIVISION NAME STAFFORD ESTATES LOT NO. 11 SECTION OR BLOCK NO. S. R. No.

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

No. Bedrooms 3 No. Bathrooms 3

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

Lot Area 3.25 acres.

Character & Porosity of Soil Loam, Suitable

Percolation Rate 2 min/in.

Topography 2-6% slope

Depth to Water Table 10'+

Rock or other impervious formations scattered rock

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

Size of Tank 1500 Gals.

Nitrification Field:

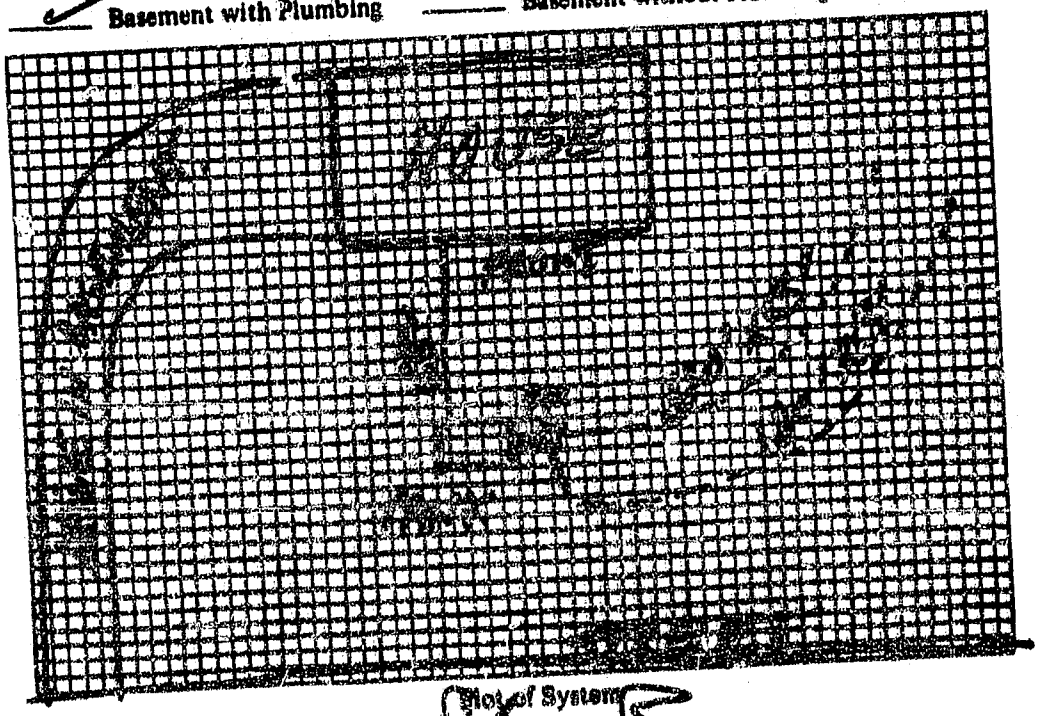
No. of Lines 2

Sq. Ft. 240 Linear Ft. 240

Depth of Stone in Lines 24"

Water Supply: Individual (✓)

Public ( )



Plot of System

Installed by David Sharp

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 4-17-90

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