IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

$572

OWNER OR CONTRACTOR Black Chevy DATE 3 M 89 PERMIT NO. CAR

PHONE: Business _____ Home _____

LOCATION 90 N Lit Fork L Cedar Ridge at End on Left

S. R. No. _____

SUBDIVISION NAME Cedar Ridge LOT NO. _____ SECTION OR BLOCK NO. _____

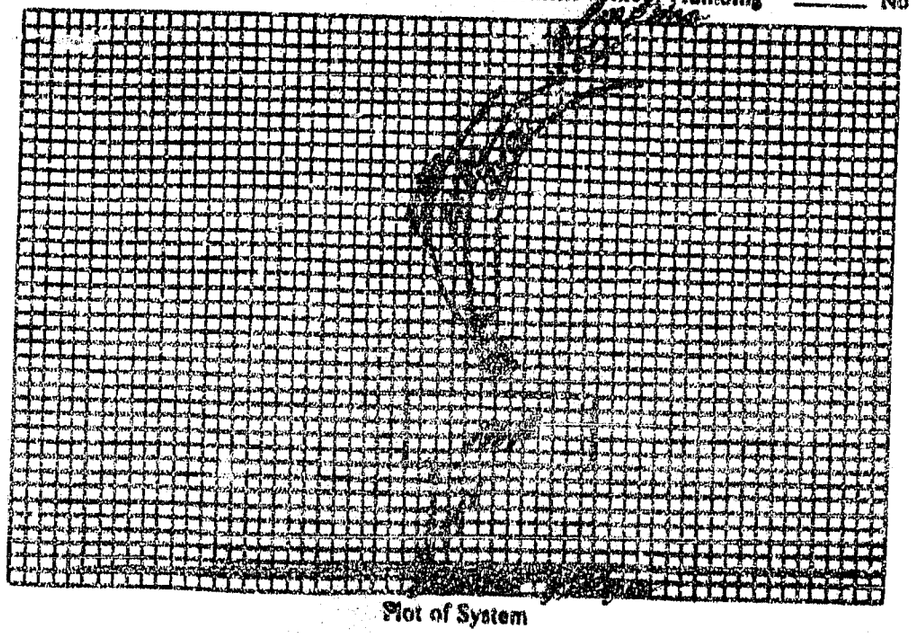
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 42 X 47

Character & Porosity of Soil Poor Suitable
Percolation Rate 30
Topography Slight
Depth to Water Table Deep
Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 210 Linear Ft. 210
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Bill Beckham

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

Signed: _____

IMPROVEMENTS PERMIT BY Bill Beckham

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Bill Beckham DATE 3-4-89

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