11745.

# 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 DOUGLAS THOMPSON DATE 7-20-90 PERMIT NO. 9E-A-17

PHONE: Business _____ Home _____

LOCATION Hwy 90 W. to Gray-T.R. on Stevenson Farm Rd. go to end & across bridge to top of hill on L - back in woods S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 2 Character & Porosity of Soil Appears suitable.

Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate Fast

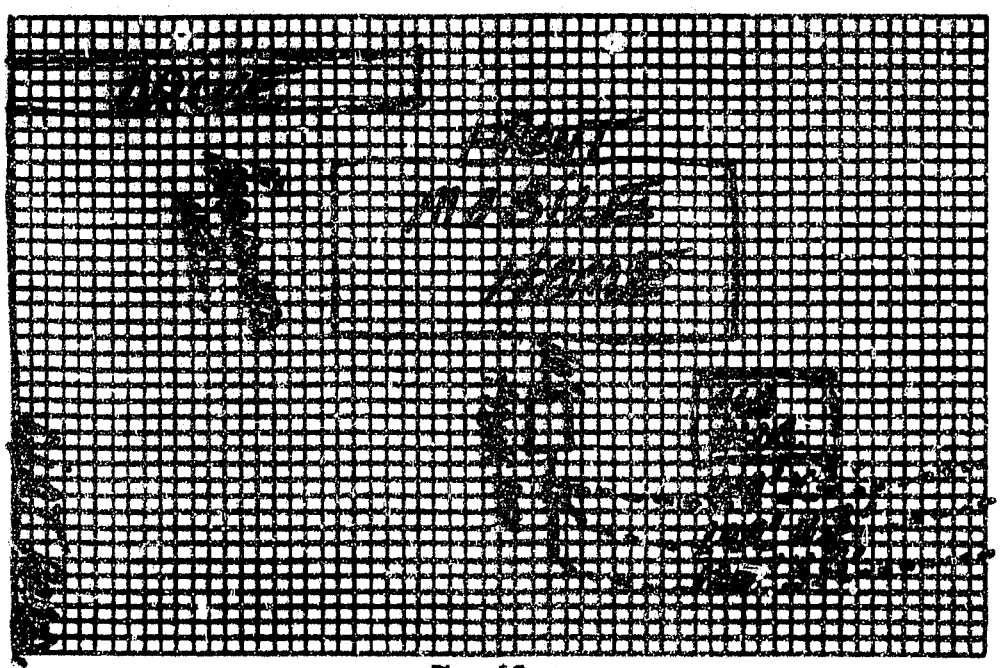
Auto. Dishwasher Yes ( ) No (✓) Topography Level

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 18+

Site Suitable Yes (✓) No ( ) Rock or other impervious formations none observed.

Lot Area 30 acres.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement (✓)



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Esber Elder

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 7-20-90

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