6:30 am.

IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

03975

OWNER OR CONTRACTOR George Snedich DATE 5/21/86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Buffalo Shls. rd. West, R on Davidson Rd, then TR on 1st st. – house at end S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 91 SECTION OR BLOCK NO. _____

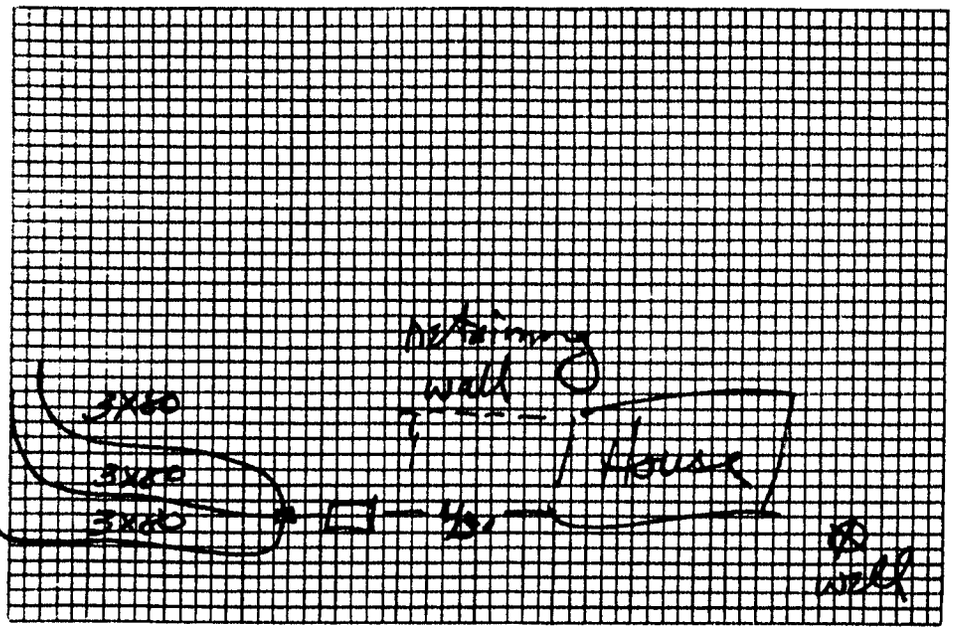
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes	(✓)	No	( )	Character & Porosity of Soil
Auto. Dishwasher	Yes	( )	No	( )	Percolation Rate
Auto. Wash. Machine	Yes	( )	No	( )	Topography
Site Suitable	Yes	( )	No	( )	Depth to Water Table
					Rock or other impervious formations

Lot Area 5.88

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by James Hudler

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 Charles W. Hudler, RS. DATE 5/21/86

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