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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 J.L. HOPE DATE 1-6-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Buffalo Shoals Rd. west - T.R. on Airport Rd. - 1/4 mi. on left. S. R. No. _____

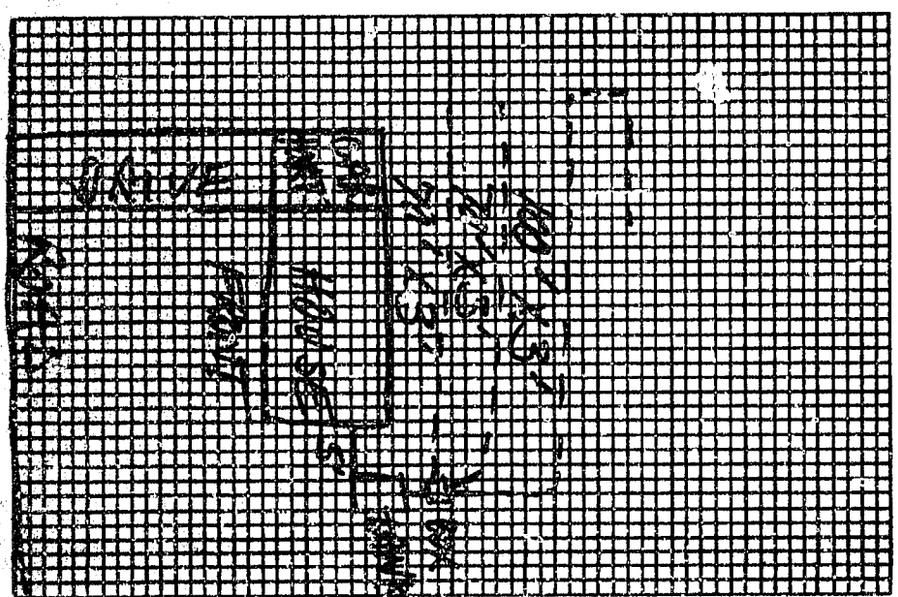
SUBDIVISION NAME LAKEWOOD ESTATES LOT NO. 77 or 76 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3	No. Bathrooms 2	Character & Porosity of Soil	Loam & Suitable.
Garbage Disposal Unit	Yes ( ) No (✓)	Percolation Rate	5 gal/sq. ft.
Auto. Dishwasher	Yes ( ) No (✓)	Topography	2-6%
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	10'+
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	none observed.

Lot Area 100' x 150'

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 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 Hope Bros.

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

Signed: _____

IMPROVEMENTS PERMIT BY Glenn Fox Jr.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 1-4-87

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