City

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 SHERRILL FAW DATE 10-25-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64-70 west T.R. on Westminster Drive - T.L. on Westover Dr. then T.R. on Westmore - T on Wellwood Ave. - corner of Wellwood House.

SUBDIVISION NAME WESTOVER DEV. LOT NO. 125 SECTION OR BLOCK NO. _____

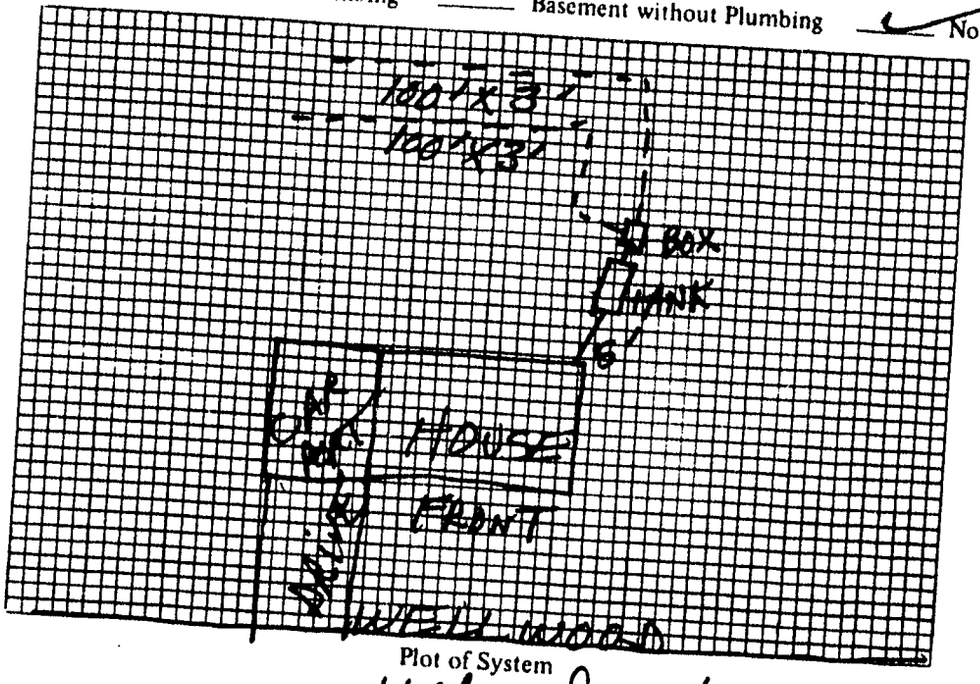
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil Prev. Suitable
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate 4 gal/sq. ft.
Auto. Wash. Machine	Yes (✓)	No ( )	Topography 2 - 6%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 10'+

Lot Area 22,000 sq. ft. Rock or other impervious formations none noted.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by Jack Stroud

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sheeks

COMMENTS: Landscape over S.T. system for drainage purposes.

CERTIFICATE OF COMPLETION BY Steve Brown

EXISTING SYSTEM CHECKED BY: _____ DATE 10-25-84

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. _____ DATE _____

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