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 RAYMOND BALL DATE 5-22-90 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 211 H St. - W. from Dt. - T.L. at Waldensian Bakery - go to stop sign H.T.R. - go to curve + house on R. S. R. No. _____

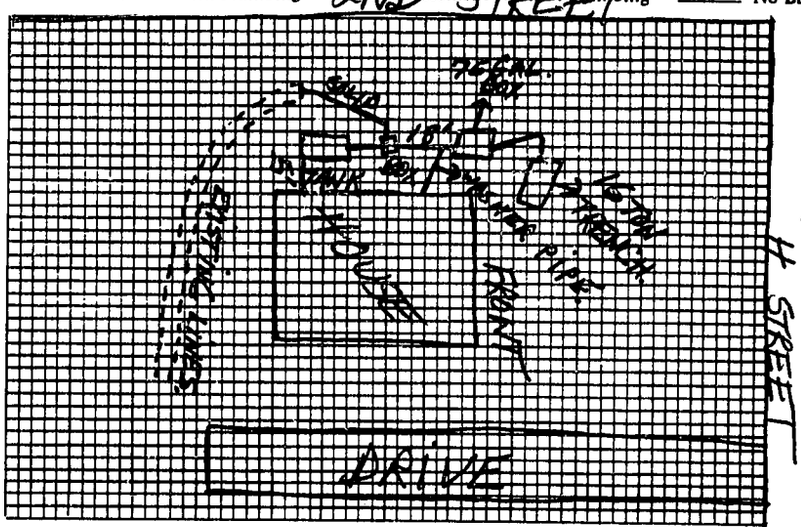
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House (4) Mobile Home ( ) Business ( ) Other Repair.

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	
Auto. Wash. Machine	Yes ( )	No ( )	Topography	
Site Suitable	Yes (4)	No ( )	Depth to Water Table	Repair.
Lot Area Limited.			Rock or other impervious formations	

_____ Basement with Plumbing 2ND STORY _____ Basement without Plumbing 4 No Basement



Plot of System

Size of Tank EXISTING. Gals.

Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public (4)

75 gal. master Hart + 16 ton trench installed.

Installed by Harry Reep.

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Tank pumped + new tee installed. Original old drainlines abandoned out rear st. where they were surfacing. Old drainlines in backyard kept intact off distbox. Washing machine tied into Master Box.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 5-22-90.

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