OWNER: MARK OSWALT

IREDELL COUNTY HEALTH DEPARTMENT

13820 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION 4/1980
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR FELIX WEBSTER DATE 2/18/92 PERMIT NO. 92-13-22

PHONE: Business _____ Home _____

LOCATION NC 90 W, TR MONTICELLO ROAD, TL MILLER FARM ROAD, TL PINEY OAKS S/D, AT END ON (R) BEFORE CUL-DE-SAC S. R. No. _____

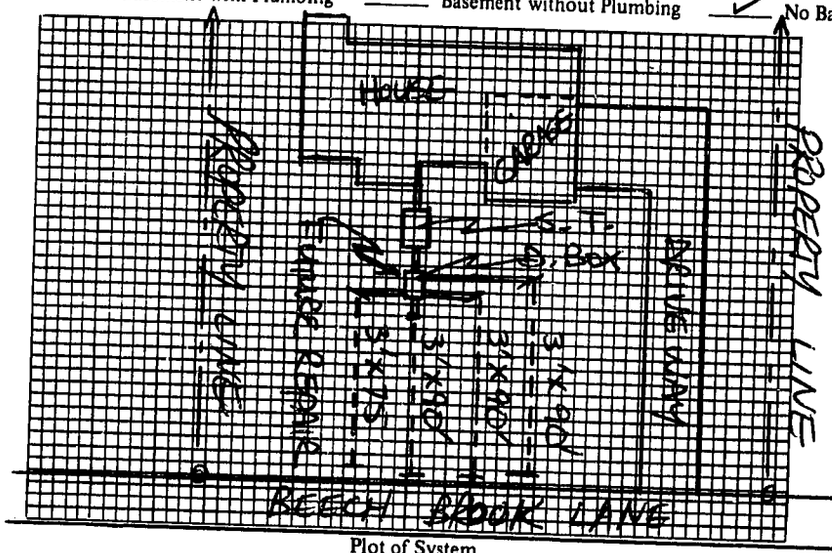
SUBDIVISION NAME PINEY OAKS LOT NO. 22 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	PS
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.35 GPD/FT2
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6-8% LS
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	>41
Lot Area AMPLE			Rock or other impervious formations	NONE

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement TP 1/3/92



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by HARRY REED

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

Signed: _____

IMPROVEMENTS PERMIT BY STEVE HENDRICK

COMMENTS: OPENING LEFT IN D. BOX ON LOWER SIDE FOR FUTURE REPAIR IF NECESSARY.

CERTIFICATE OF COMPLETION BY STEVE HENDRICK DATE 2/18/92

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