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IREDELL COUNTY HEALTH DEPARTMENT

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

OWNER OR CONTRACTOR JEFFREY T. ELLIS DATE 4/28/93 PERMIT NO. 9A-9-A-58

PHONE: Business _____ Home _____

LOCATION NC90W, TR MONTICELLO DRIVE, TL MILLER FARM ROAD, TL ANTLER DRIVE, 2ND LOT ON (L) S.R. No. _____

SUBDIVISION NAME DEERCROFT LOT NO. 58 SECTION OR BLOCK NO. _____

House ☑ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ☐ No ☑

Auto. Dishwasher Yes ☑ No ☐

Auto. Wash. Machine Yes ☑ No ☐

Lot Area 110' x 295'

Soil Characteristics PS

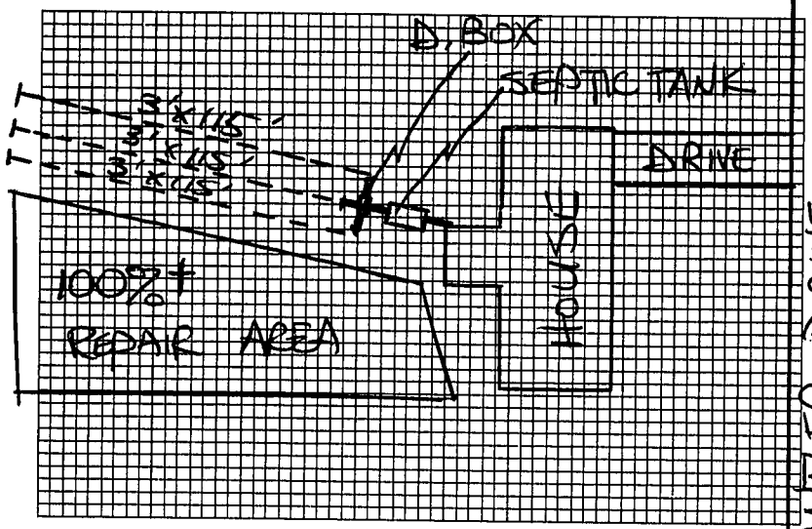
Application Rate 0.35 GPD/FT²

Topography 2-4% LINEAR

Depth to Water Table >41'

Rock or other impervious formations NONE

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement ✓ Crawl Space



Plot of System (Not to Scale)

ACP 3/11/93

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1035 Linear Ft. 345

Depth of Stone in Lines 12"

Water Supply: Individual ☐ Public ☑

Installed by DAVID YOUNTS

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

Signed: _____

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY STEVE HEDRICK

COMMENTS REPAIR AREA IS 100% CONVENTIONAL, GRAVITY-FED

CERTIFICATE OF COMPLETION BY STEVE HEDRICK DATE 4/28/93

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

~~Health Dept. Copy: White~~ ~~Inspection Dept. Copy: Yellow~~ ~~Sanitarian's Copy: Pink~~ ~~Owner's Copy: Gold~~

MILLER FARM ROAD