TOWN OF TROUTMAN.

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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 ROSE CANALE DATE 7-7-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 21 S to Troutman - T.R. on Perth Church Rd. - T.L. on Ebenezer St. - T.R. 2nd Side Circle entrance - 4th lot on R. S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ 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 ( )

Site Suitable Yes (✓) No ( )

Lot Area 15,000 sq. ft.

Character & Porosity of Soil Sandy Loam Suitable.

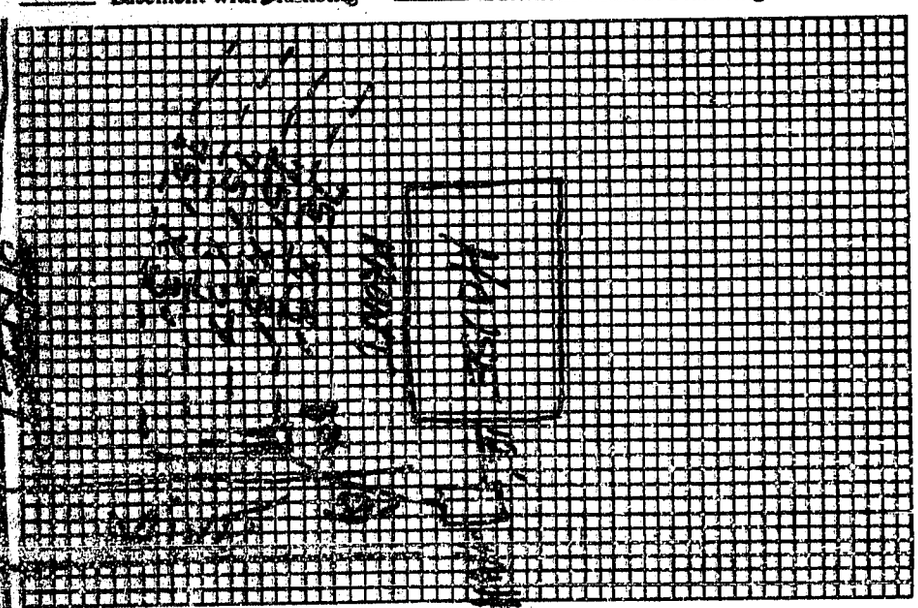
Percolation Rate Appl. Jan. 87

Topography 2-6%

Depth to Water Table 12+

Rock or other impervious formations None observed.

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Ray Beam

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sloan R.S.

COMMENTS: Do not drive or park over septic tank system.

CERTIFICATE OF COMPLETION BY Steve Baldwin DATE 7-17-87

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