03451

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 Croix miller DATE 1-21-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION lot 33 Kingswood Shoemaker Drive TL on Cattlecreek 4th lot on left

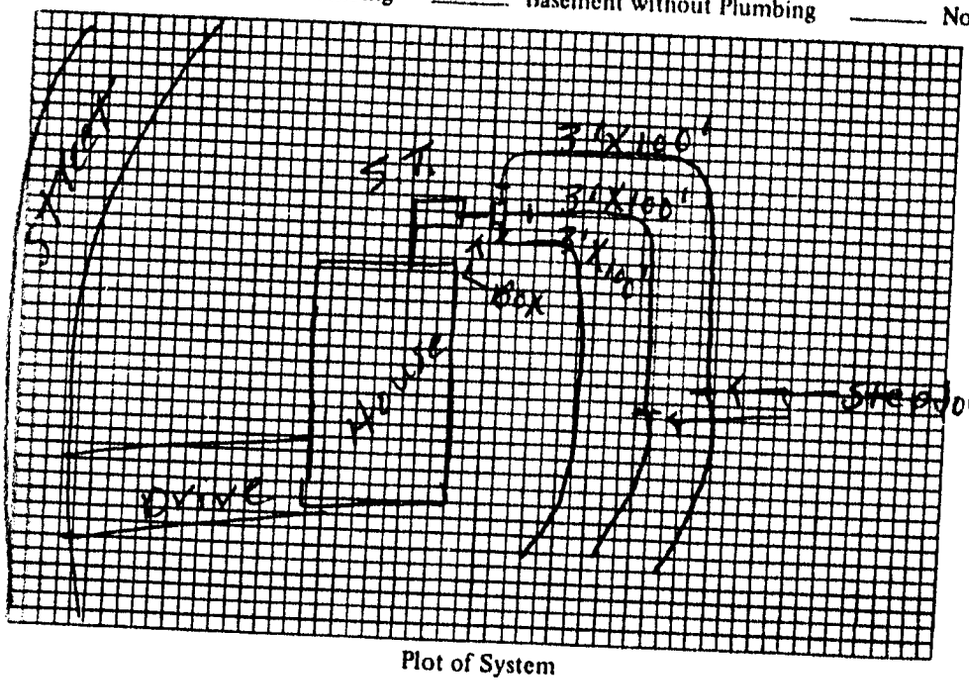
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clayey	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	.4	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2+0650	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+	
Lot Area 105'X240'			Rock or other impervious formations	none	

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 700 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by James Hudler

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

Signed: _____

lay-out Amended 1-20-86

IMPROVEMENTS PERMIT BY R. C. moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY R. C. moore

EXISTING SYSTEM CHECKED BY: _____ DATE 1-21-86

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