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 Wayne Fetbetter DATE 10-25-85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 2421 Belle Terra

SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____

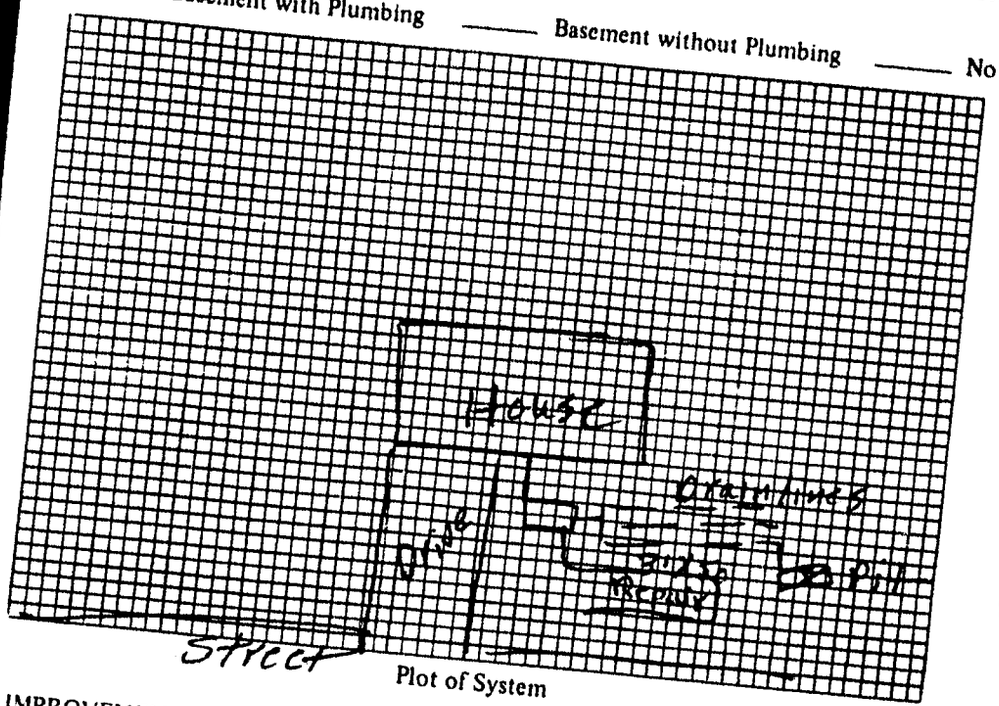
House (✓) Mobile Home ( ) Business ( ) Other Repair SECTION OR BLOCK NO. _____

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 ( )	No ( )	Depth to Water Table _____
			Rock or other impervious formations _____

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 1

Sq. Ft. 150 Linear Ft. 50

Depth of Stone in Lines 12

Water Supply: Individual ( )

Public (✓)

+ 16 Tank 10' +

Installed by Wes Litton

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

Signed: _____

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: L. C. Moore DATE 10-25-85

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