Paid 3/4/91
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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)

→ James B Pos,

OWNER OR CONTRACTOR Stout International DATE 3-15-91 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64E beside Bowling Alley At I-40 Truck Center S. R. No. _____

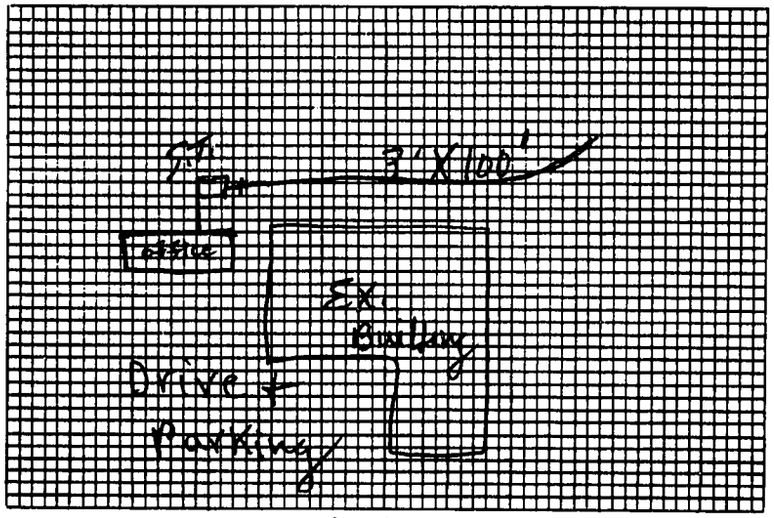
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Office Mtt 4 Employees For Farm & Tractor Sales Center

No. Bedrooms _____	No. Bathrooms _____	Character & Porosity of Soil	Clayey
Garbage Disposal Unit	Yes ( ) No ( )	Percolation Rate	14
Auto. Dishwasher	Yes ( ) No ( )	Topography	2 to 6%
Auto. Wash. Machine	Yes ( ) No ( )	Depth to Water Table	10'+
Site Suitable	Yes ( ) No ( )	Rock or other impervious formations	none

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 1
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY P. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 3-15-91

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