07511

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 Lawrence R. Carr DATE 2-23-88 PERMIT NO. ______

PHONE: Business ______ Home ______

LOCATION Eastwood Dr. ______ S. R. No. ______

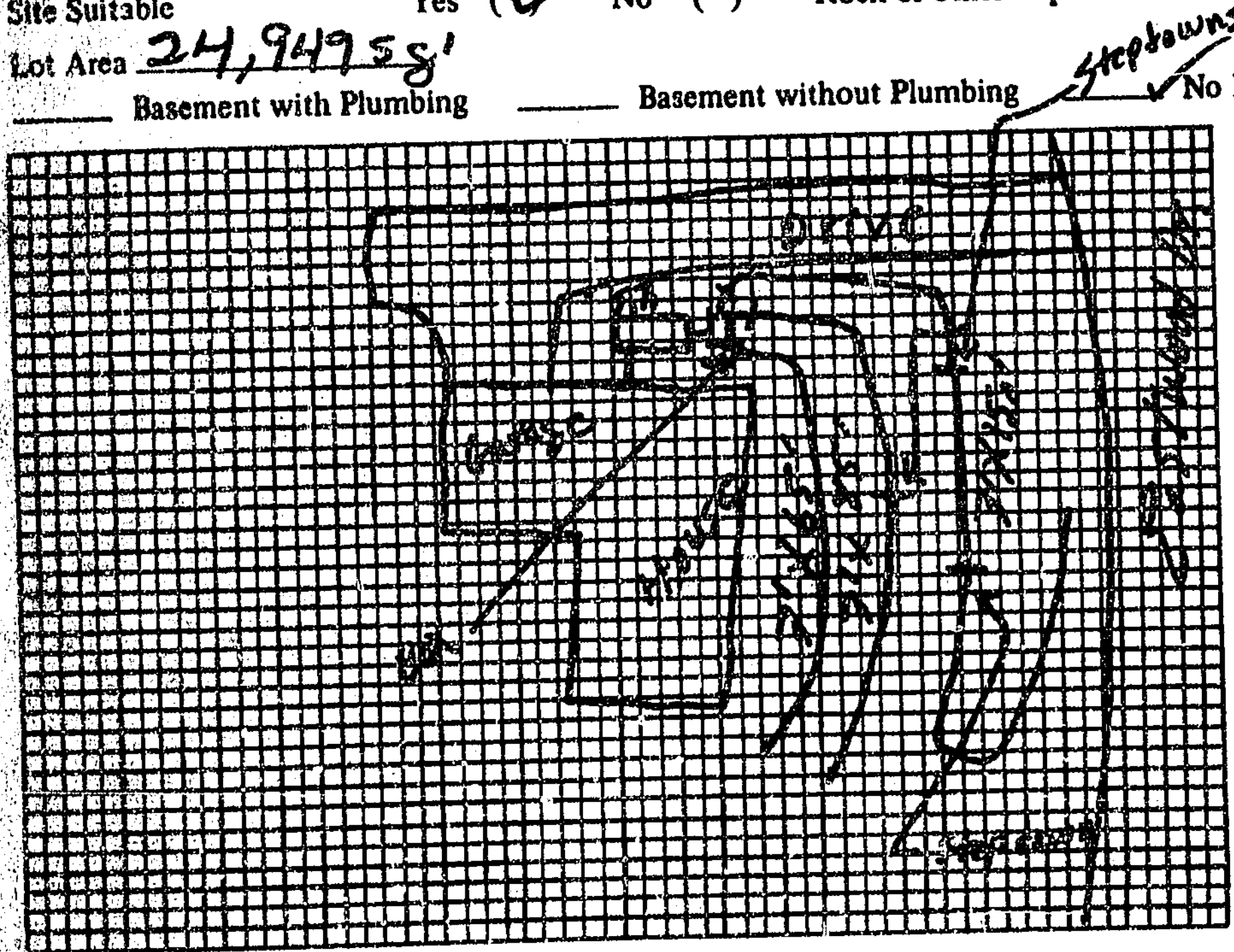
SUBDIVISION NAME Broadwood acres LOT NO. 15 SECTION OR BLOCK NO. ______

House ( ) Mobile Home ( ) Business ( ) Other ______

No. Bedrooms 3	No. Bathrooms 2	Character & Porosity of Soil	Clayey
Garbage Disposal Unit	Yes (✓) No ( )	Percolation Rate	.4
Auto. Dishwasher	Yes (✓) No ( )	Topography	2 to 8%
Auto. Wash. Machine	Yes (✓) No ( )	Depth to Water Table	10'+
Site Suitable	Yes (✓) No ( )	Rock or other impervious formations	Saprolite "8"

Lot Area 24,949 sq'

______ Basement with Plumbing ______ Basement without Plumbing ______ Stepdowns ✓ No Basement



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by A-1 Backhoe

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

Signed: ______

IMPROVEMENTS PERMIT BY R. C. Moore

COMMENTS: ______

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 2-23-88

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