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 Forti's Corp DATE 7-16-80 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Rt 2171

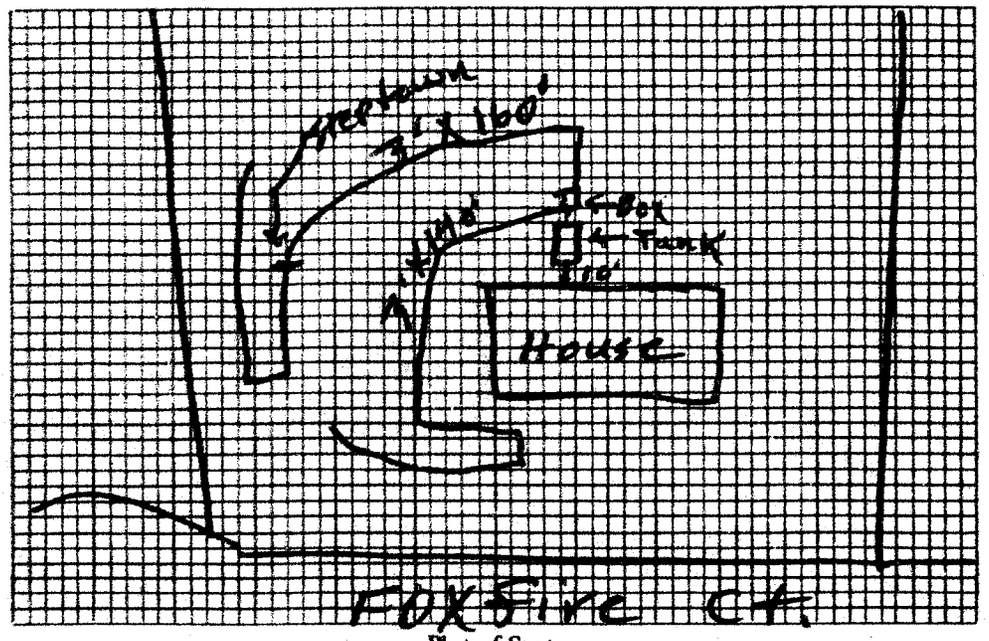
S. R. No. _____

SUBDIVISION NAME Danbury Forest LOT NO. 28 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2 1/2 Character & Porosity of Soil cecil Clay
Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate 120 min/inch .5 app rate
Auto. Dishwasher Yes (✓) No ( ) Topography 2 to 4% slope
Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table 10'+
Site Suitable Yes (✓) No ( ) Rock or other impervious formations none
Lot Area 1/2 acre

✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Pfaff & Sale

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

Signed: _____

IMPROVEMENTS PERMIT BY R. C. Moore

COMMENTS: landscape & pipe Gutters so that surface water will not stand over Tank or lines.

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 7-16-80

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