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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)

OWNER OR CONTRACTOR Sunward Energy DATE 6-1-90 PERMIT NO. 1066-0-22

PHONE: Business _____ Home _____

LOCATION End of Bonnie Lane Meadowview Est. S. R. No. _____
Sec IV lot 22

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

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

No. Bedrooms 3 No. Bathrooms 2

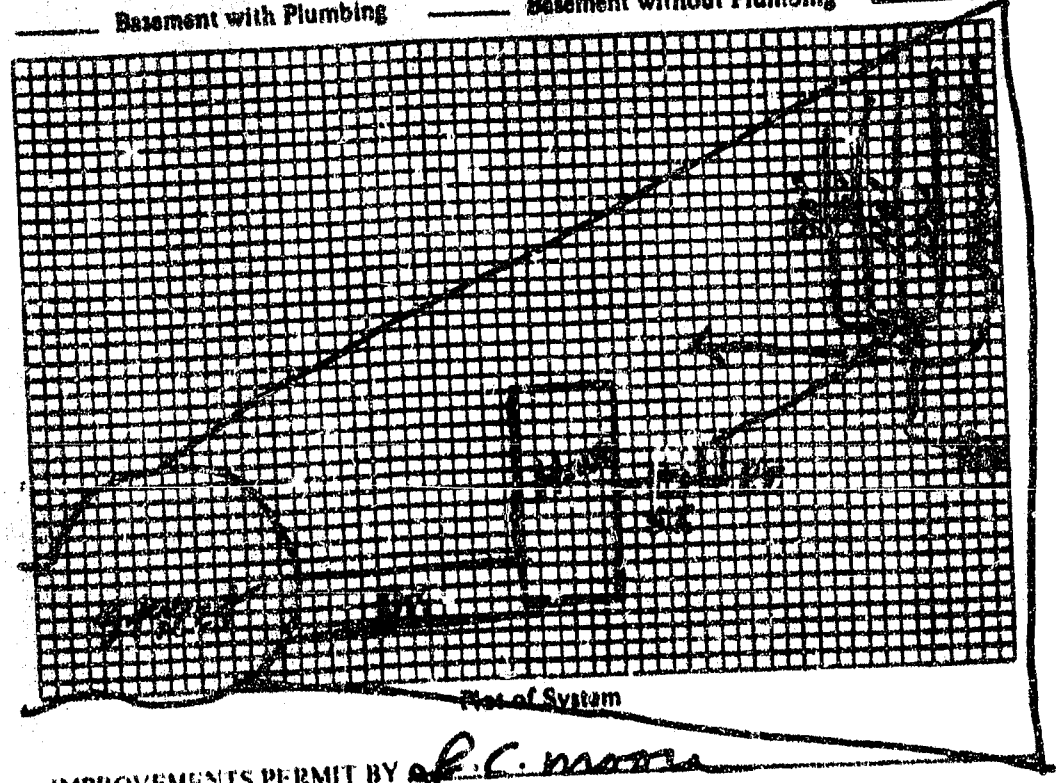
Garbage Disposal Unit	Yes ( )	No (✓)
Auto. Dishwasher	Yes (✓)	No ( )
Auto. Wash. Machine	Yes (✓)	No ( )
Site Suitable	Yes (✓)	No ( )

Character & Porosity of Soil Clayey
Percolation Rate 3 gal/sq. ft/day
Topography 2 to 6%
Depth to Water Table 10'+
Rock or other impervious formations None

Lot Area 1 Acres

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

1000 Seamless Pump T.
Size of Tank 1000 S.T. Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)
+ French Drain around system



Installed by Tommy Frye

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

Signed: _____

IMPROVEMENTS PERMIT BY P. C. Moore

COMMENTS: Wire pump & Alarm according to Inckll Co. Building Insp. Standards

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 6-1-90

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