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 Alvin Clement DATE 4 1989 PERMIT NO. 616

PHONE: Business _____ Home _____

LOCATION Brady Bennett & Hemlock 5th Dr to Left

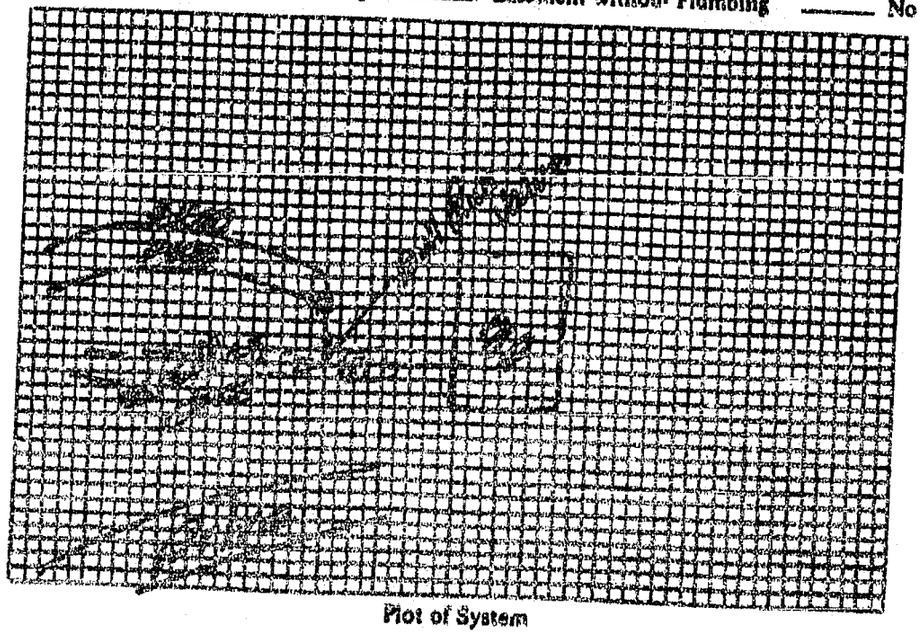
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

House ( ) Mobile Home ( ) Business ( ) Other Repair

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Clayey
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	5
Auto. Wash. Machine	Yes ( )	No ( )	Topography	Slight
Site Suitable	Yes ( )	No ( )	Depth to Water Table	60"
Lot Area _____			Rock or other impervious formations	None

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 600 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 400 Linear Ft. 200
Depth of Stone in Lines 24"

Water Supply: Individual (✓)
Public ( )

Installed by HC Houston

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

Signed: _____

IMPROVEMENTS PERMIT BY JC Moore

COMMENTS: Install all Plumbing Leaks; Alternate Fields every 6 months

CERTIFICATE OF COMPLETION BY _____

EXISTING SYSTEM CHECKED BY _____ DATE 4 1989

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE _____

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