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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)

DATE 8-29-90 PERMIT NO. 5K-A-68

OWNER OR CONTRACTOR Ed Crutchfield

PHONE: Business _____ Home _____

LOCATION 70E TR Nabors Rd TR Wayside at end on Left. S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Character & Porosity of Soil Sandy Loam

Percolation Rate 3 min/in. 45 min/in

Topography Rolling

Depth to Water Table 10'+

Rock or other impervious formations Saprolite 36"

Lot Area 100 acres 3 X 150'

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Size of Tank _____ Gals.

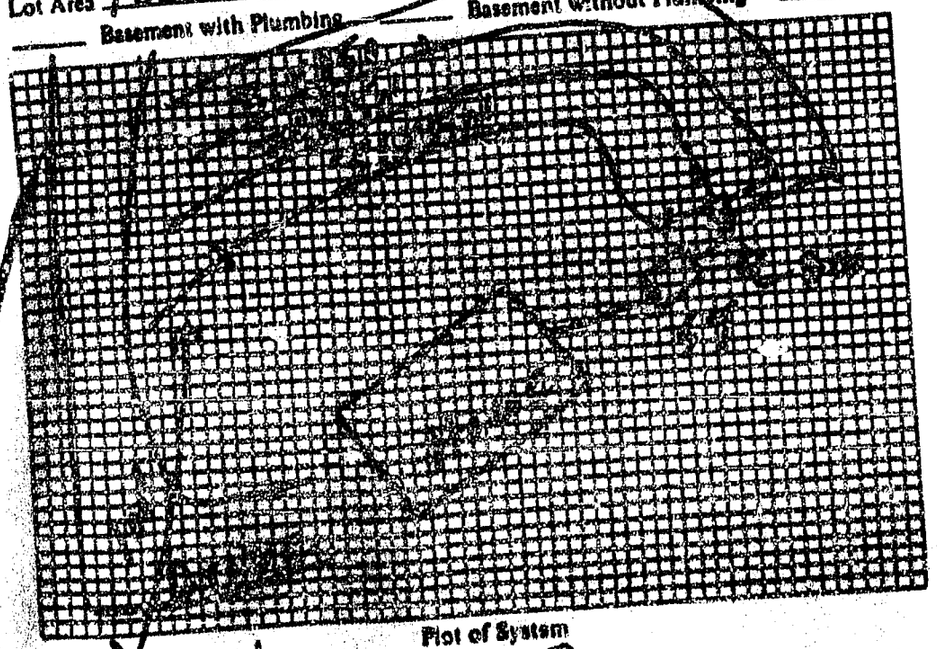
Nitrification Field:

No. of Lines 4

Sq. Ft. 1800 Linear Ft. 600

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )



Plot of System

Installed by Mayflower Septic Tank (Joe Lemmons Sr.)

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

Signed: _____

IMPROVEMENTS PERMIT BY D. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D. C. Moore DATE 9-27-90

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