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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 Barry Ehret DATE 7-18-92 PERMIT NO 11P-7-164

PHONE: Business _____ Home _____

LOCATION Old Mocksville Rd 2 mi on left Past Providence Ch. 1mi back of road next to Tahm River S. R. No. _____

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

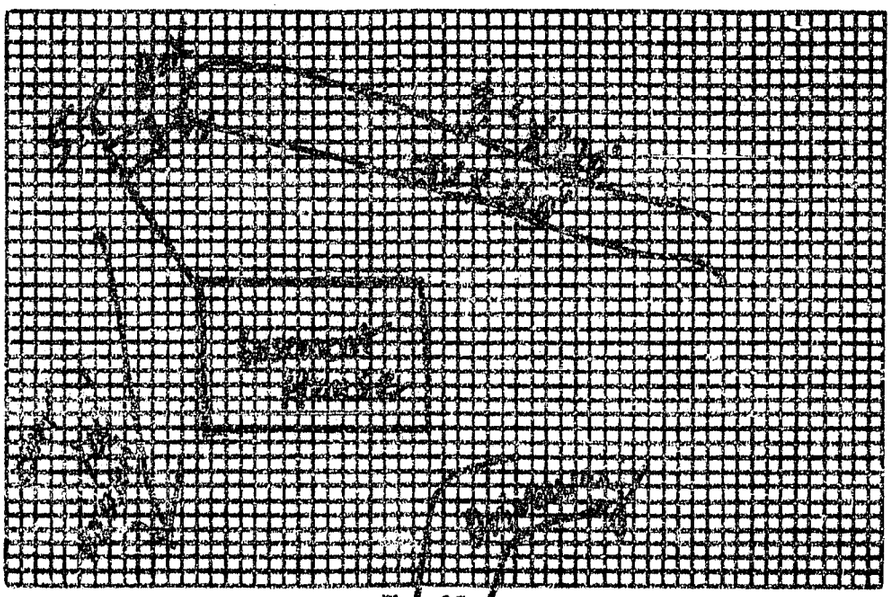
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Gravelly, Clay
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	2 Bpi / 55 / 1 Hour
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Fair to Good
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10' +
			Rock or other impervious formations	Some Rock

Lot Area 5 acres

✓ Basement with Plumbing _____ Basement without Plumb. _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by John Frances

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

Signed: _____

IMPROVEMENTS PERMIT BY R. C. Moore Permit Ran out obtain New

COMMENTS: Property Description

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 7-18-92

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