IREDELL COUNTY HEALTH DEPARTMENT

04473

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Judy Webb DATE 04-18-86 PERMIT NO.

PHONE: Business Home

LOCATION US 21 North, T.R. on Mt Bethel Rd, TR on Arrowbrook Rd, Mobile Homes on Rt near end of road S. R. No.

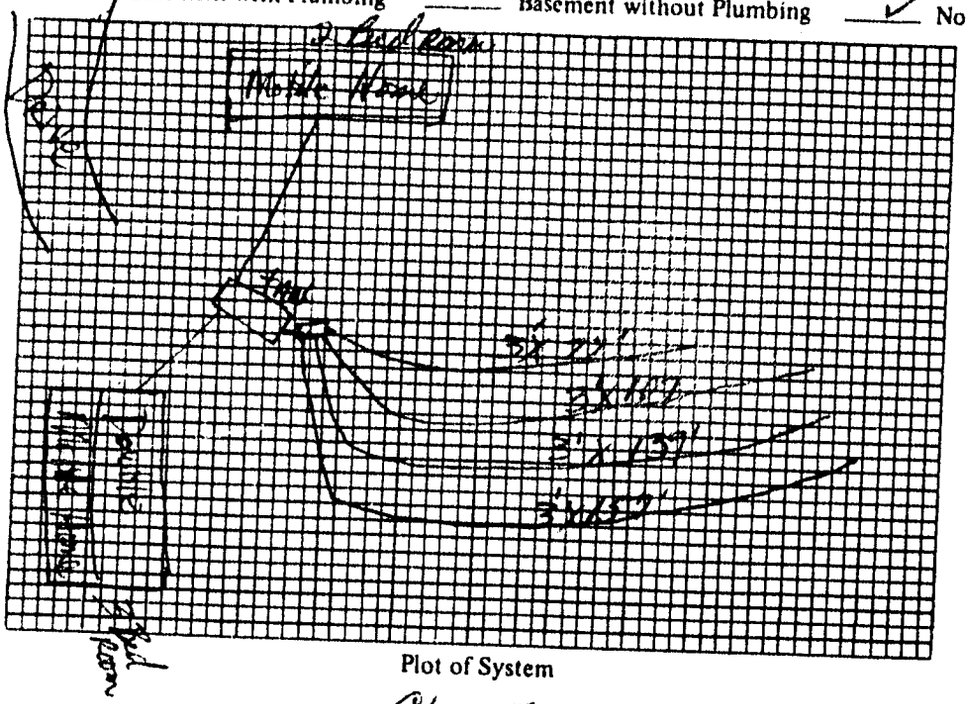
SUBDIVISION NAME LOT NO. SECTION OR BLOCK NO.

House ( ) 2 Mobile Homes (✓) Business ( ) Other Designed for 2 Mobile Homes (2 bedrooms each)

No. Bedrooms 5 No. Bathrooms 2½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Grav. Suitable
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	0.4 gal/ft²/day
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	0-6% slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10+
Lot Area Ample			Rock or other impervious formations	none

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1440 Linear Ft. 480
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public (✓)

Installed by James Hartness

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

Signed: _____

IMPROVEMENTS PERMIT BY Glenn Fox, Jr.

COMMENTS: 2 leave lines exceed 125'

CERTIFICATE OF COMPLETION BY Jerry L Price — Glenn Fox 4/21/86

EXISTING SYSTEM CHECKED BY: _____ DATE 04-18-86

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