IREDELL COUNTY HEALTH DEPARTMENT

VOIDS PREVIOUS EXISTING SYSTEM CHECK ISSUED 5/7/92

IMPROVEMENT PERMIT AND CERTIFICATE OF COMPLETION / OPERATIONS PERMIT

14574

OWNER OR CONTRACTOR CHARLES NEESE DATE 5/12/92 PERMIT NO. 12A-A-29

PHONE: Business 919-998-3929 Home

LOCATION US 64 E, TL BATTLE ROAD, TL VAUGHN MILL ROAD, 1ST MH ON (L) S.R. No.

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 ☐

Lot Area LIMITED

Soil Characteristics

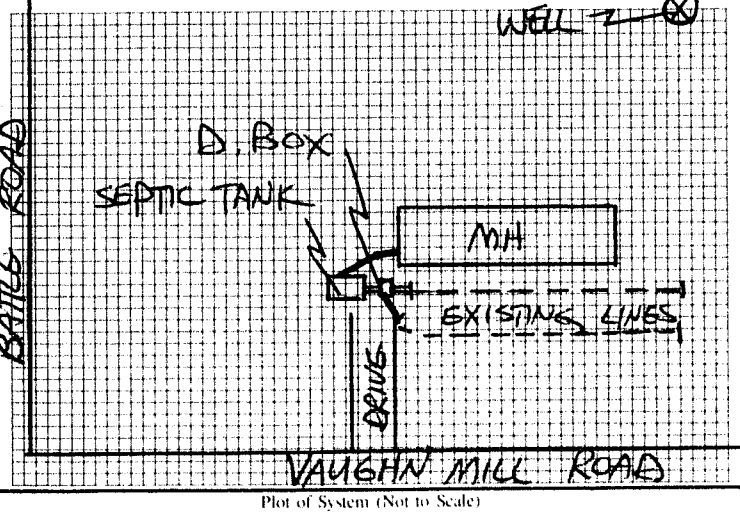
Application Rate

Topography

Depth to Water Table EXISTING

Rock or other impervious formations

Basement with Plumbing Basement without Plumbing No Basement ✓ Crawl Space



Plot of System (Not to Scale)

Size of Tank Gals.

Nitrification Field:

No. of Lines EXISTING

Sq. Ft. Linear Ft.

Depth of Stone in Lines

Water Supply: Individual ✓ WELL

Public ☐

Installed by

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

Signed:

(IMPROVEMENT PERMIT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE.)

IMPROVEMENT PERMIT BY

COMMENTS ① KEEP MH MINIMUM 5' FROM SEPTIC SYSTEM,
② MH NOT ON SITE AT TIME OF INSPECTION.
③ VOIDS PREVIOUS EXISTING SYSTEM CHECK ISSUED 5/7/92

CERTIFICATE OF COMPLETION BY DATE

EXISTING SYSTEM CHECKED BY STEVE HEDRICK DATE 5/12/92

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 unapproved changes are made to the site, and/or if any false information is supplied toward securing Improvement Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold