IREDELL COUNTY HEALTH DEPARTMENT

9696 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Lynn Schenk DATE 4/13/87 PERMIT NO. 92

PHONE: Business _____ Home _____

LOCATION 115N Friendship pst Sandy Ridge Church Shop on Right S. R. No. _____

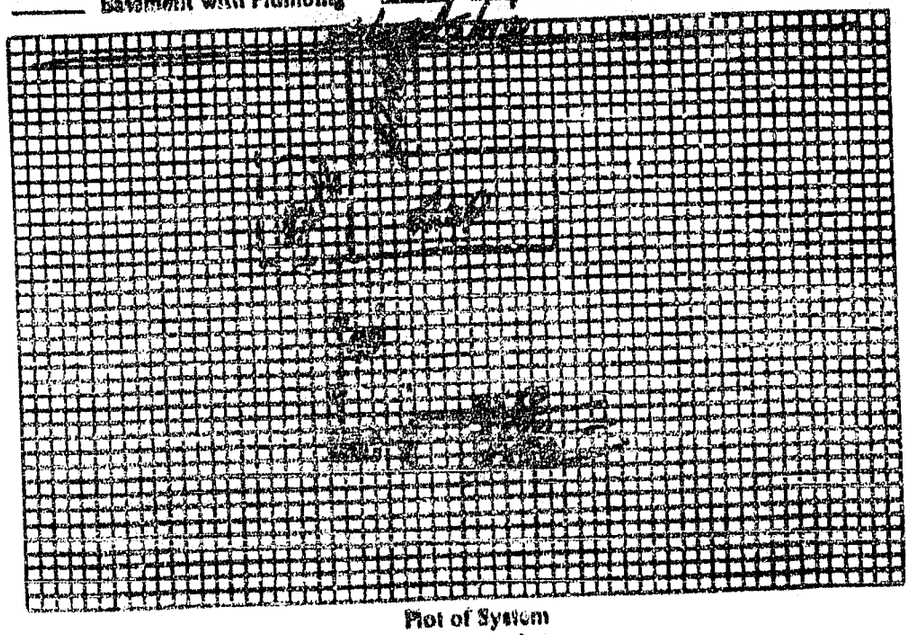
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business (✓) Other 3-5 employees Garage

No. Bedrooms 0	No. Bathrooms 1			Character & Porosity of Soil	Sandy Suitable
Garbage Disposal Unit	Yes ( )	No (✓)		Percolation Rate	32
Auto. Dishwasher	Yes ( )	No (✓)		Topography	2% 4
Auto. Wash. Machine	Yes ( )	No (✓)		Depth to Water Table	10+
Site Suitable	Yes ( )	No (✓)		Rock or other impervious formations	Scattered Rock

Lot Area Ample

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 222 Linear Ft. 240
Depth of Stone in Lines 24

Water Supply: Individual (✓)
Public ( )

Installed by Al Backhoe

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

Signed: _____

IMPROVEMENTS PERMIT BY P Weaver

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 4-28-87

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