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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)

H-67C

OWNER OR CONTRACTOR Elmer Sawyer DATE 4/10/90 PERMIT NO. 90-H-67C

PHONE: Business _____ Home _____

LOCATION US 21 - R on Bogue Rd - R on Meyer Rd 2nd

2nd Lot on Right S. R. No. _____

SUBDIVISION NAME Bogue Hills LOT NO. 3 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)
Auto. Dishwasher	Yes (✓)	No ( )
Auto. Wash. Machine	Yes (✓)	No ( )
Site Suitable	Yes (✓)	No ( )

Lot Area 2 Ac

Character & Porosity of Soil Sandy Loam

Percolation Rate 2 - 60

Topography Rolling

Depth to Water Table 48"

Rock or other impervious formations None Encountered

_____ Basement with Plumbing ✓ Basement without Plumbing _____ No Basement

Size of Tank 1000 Gals.

Nitrification Field:

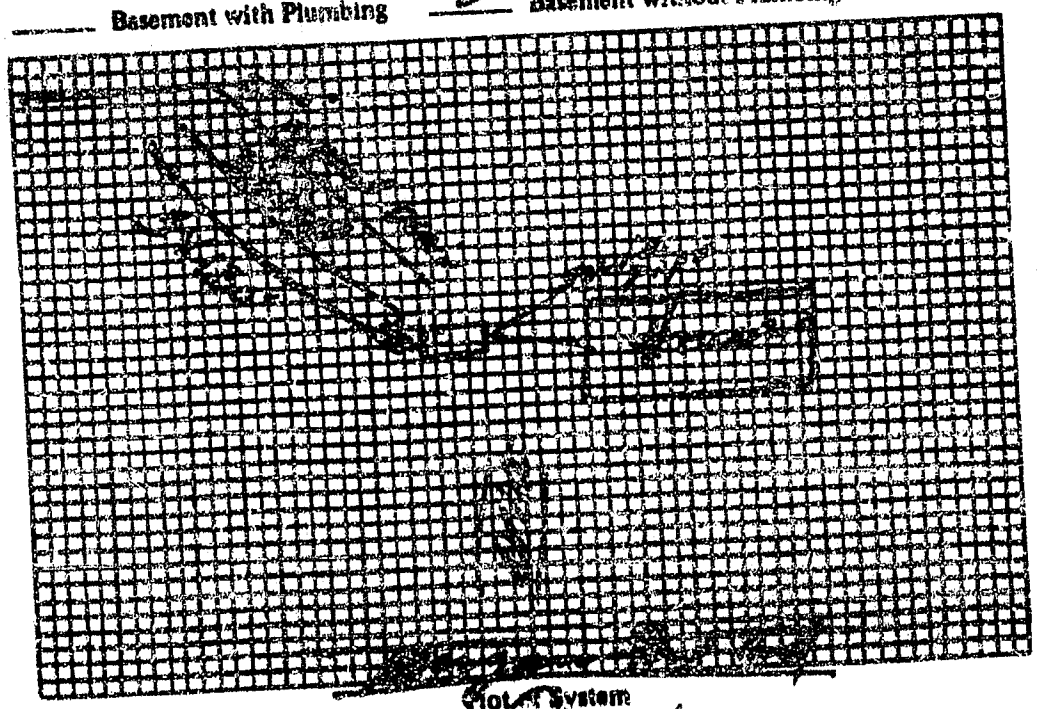
No. of Lines 2

Sq. Ft. 120 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )



Plot of System

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY D. Thomas

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 4/10/90

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