IREDELL COUNTY HEALTH DEPARTMENT

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

10044

OWNER OR CONTRACTOR Dwayne Campbell DATE 7-28-89 PERMIT NO. 43

PHONE: Business _____ Home _____

LOCATION E/Old 901 & Howard Bridge Double wide on Left 2nd Dirt Rd

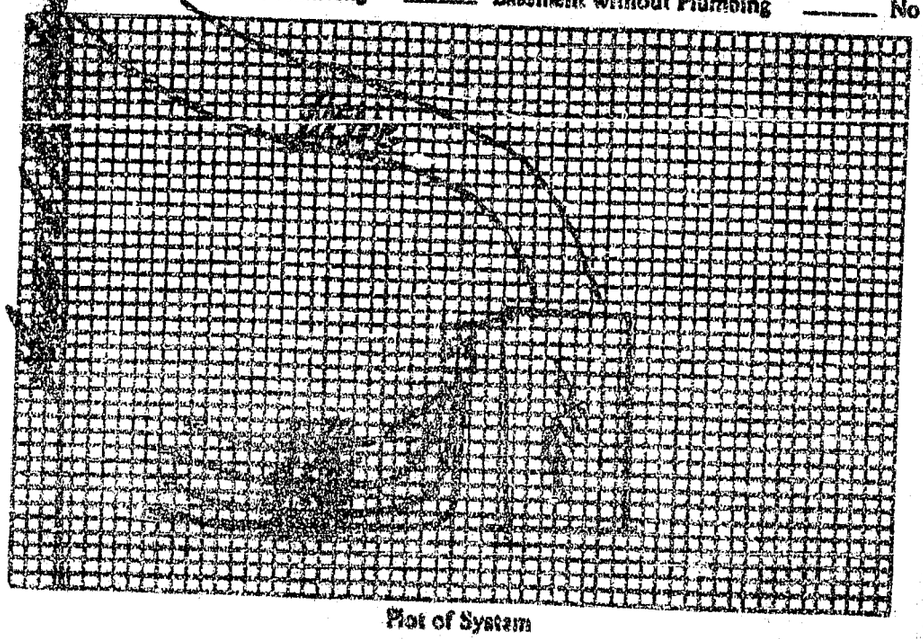
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Grav Suitable	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	2	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Hilly	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	12'	
Lot Area 1 1/4 ac			Rock or other impervious formations	Scattered Rock	

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 400 Linear Ft. 320
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by James Hedler

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Lee

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____

EXISTING SYSTEM CHECKED BY: _____ DATE 7-28-89

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