IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System — G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Neil Green DATE 5-4-82 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N to Statesville - TR on SR 2115 - Cross Hunting Creek TL on SR 2116 - 6c to fork of Rd - TR on 2104 - House on L in Cove R. No 2104

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

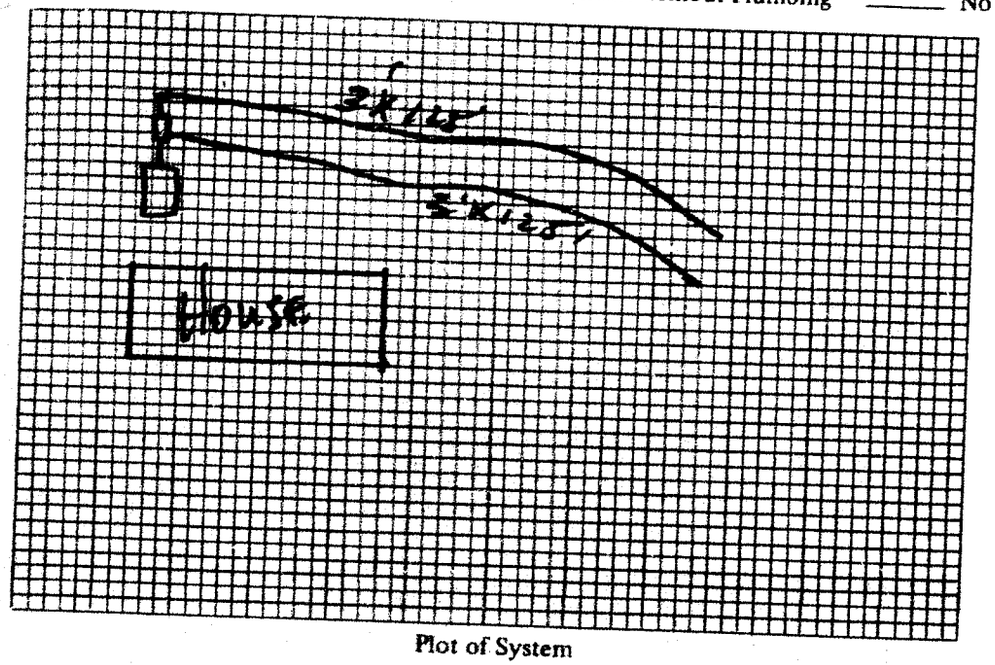
House (✓) Mobile Home ( ) Business ( ) Other _____

Poor Bentalls

No. Bedrooms 3	No. Bathrooms 2		Character & Porosity of Soil	CrBr
Garbage Disposal Unit	Yes ( )	No (✓)	Percolation Rate	6 min. 60 gal. aft. 24 hrs.
Auto. Dishwasher	Yes ( )	No (✓)	Topography	2-6% Slope
Auto. Wash. Machine	Yes (✓)	No ( )	Depth to Water Table	
Site Suitable	Yes (✓)	No ( )	Rock or other impervious formations	Coarse

Lot Area Acreage

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Ray Lentz

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 5/4/82

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