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 L. G. Meyers DATE 8-15-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Harmony 9 0 1 E. TL on SR 2126 – TL on SR 2123 Cement Shop on Right past 2nd Dwelling S. R. No. 2123

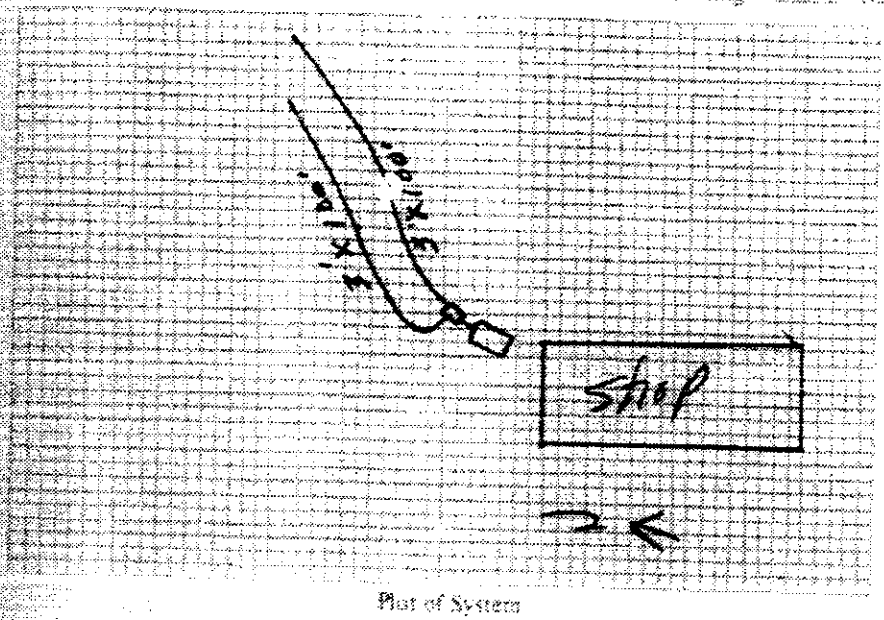
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil Cecil Fine Sandy Loam
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate 5 Min. 17 Sec. Appl.
Auto. Wash Machine	Yes ( )	No ( )	Topography 2-6% Slope
Site Suitable	Yes ( )	No ( )	Depth to Water Table 40"
Lot Area _____			Rock or other impervious formations None

___ Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plat of System

Size of Tank 1000 Gals

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by J. L. Reed

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

Signed _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Tapp DATE 8/15/83

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 or implied.

Improvements Permit.

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

JAN. 8, 1989 21:54