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 Allen Jenkins DATE 2-27-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Old Mountain Rd. Approx 3½ miles above Bradfords X Rd. Go just past Rd # 1537. Trailer on L. in edge of woods S. R. No. _____

SUBDIVISION NAME Behind Lynn Jenkins House LOT NO. _____ SECTION OR BLOCK NO. _____

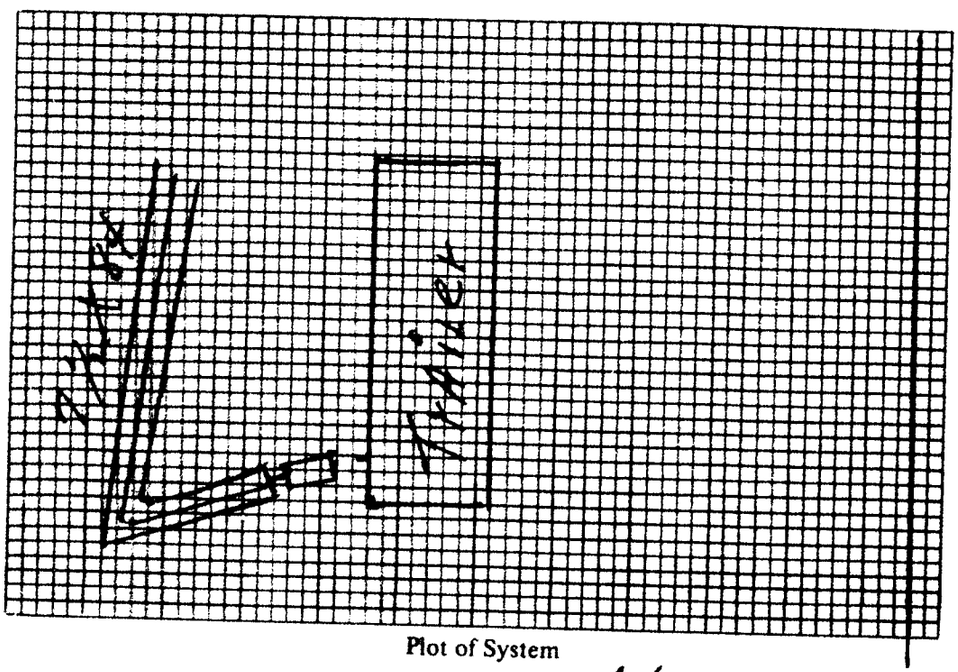
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms _____

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

Lot Area Acreage

Character & Porosity of Soil Red Clay
Percolation Rate No Perk Test Made
Topography Slight Slope
Depth to Water Table Low
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 630 Linear Ft. 252
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )
From Lynns House

Installed by Harlen Lackey

IMPROVEMENTS PERMIT BY E. G. Stevenson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. G. Stevenson DATE 2-27-74

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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