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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)

OWNER OR CONTRACTOR Carl Knox DATE 10-11-24 PERMIT NO. 2796

PHONE: Business _____ Home 664-2542

LOCATION 150 West TL on 111 500' TR on 2nd 300' TL 1st house on left S. R. No. 2nd

SUBDIVISION NAME Terrace Acres LOT NO. 2 SECTION OR BLOCK NO. B

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area 125' X 200'

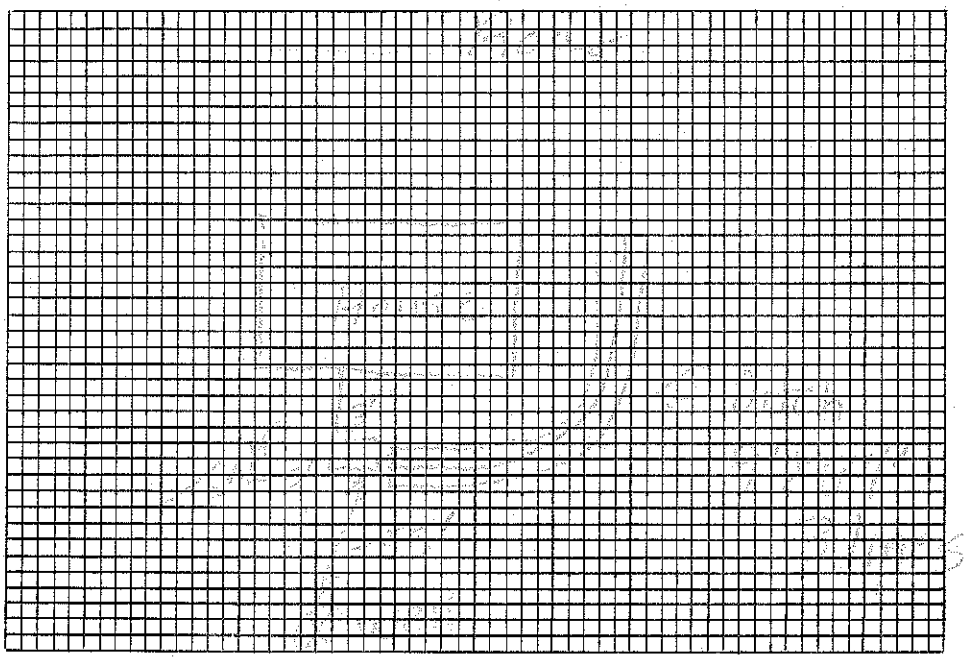
Character & Porosity of Soil Fine Sandy clay loam

Percolation Rate 30 min/inch

Topography Flat 3% slope

Depth to Water Table 10' +/-

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 18"

Water Supply: Individual ( )

Public ( )

Installed by Samsworth

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 10-11-24

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