03995

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 JACK CLANTON DATE 1-6-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Bethel Church Rd. - W. Old Mtn. Rd. - T.L. on mock mill Rd. - go 1/2 mi. T.L. at 2nd entrance - next to last lot on (R). S. R. No. _____

SUBDIVISION NAME MOCK MILL RUN LOT NO. 13+12+14 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1-2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 1.05 acres.

Character & Porosity of Soil Prop. Suitable.

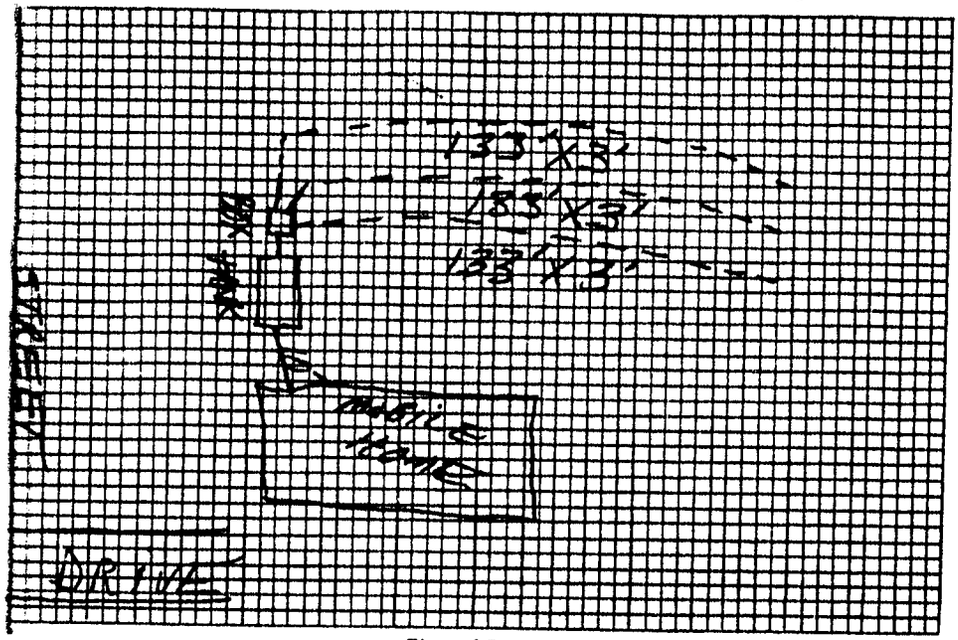
Percolation Rate 30 min/sq.ft.

Topography 2-6%

Depth to Water Table 4'+

Rock or other impervious formations scattered.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"+

Water Supply: Individual ( )
Public (✓)

Installed by James Hudler

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sleeks R.S.

COMMENTS: Landscape over system for surface water control.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 1-6-86.

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