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 MICHAEL JENKINS DATE 8-21-87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 W - T.R. on Antiotam Rd. - T.L. on Midway Dr. - T.R. on Abner Rd. - ½ mi. on (L).

SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____ SECTION OR BLOCK NO. _____

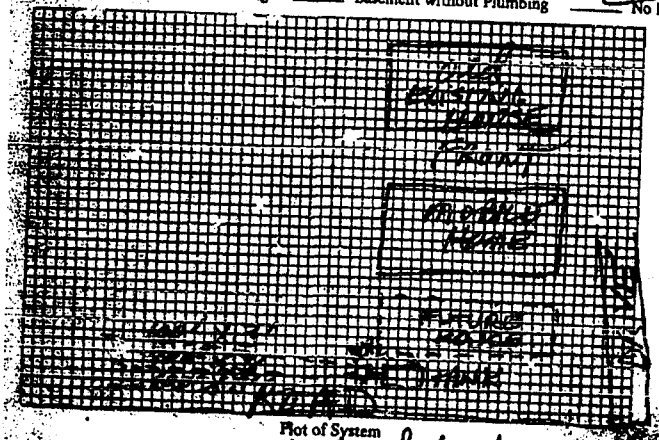
House ( ) Mobile Home (✓) Business ( ) Other 3 bedr. house later.

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clayey
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	4 gal. / sq. ft.
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10+
			Rock or other impervious formations	none observed

Lot Area 24 acres.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Lineal Ft. 300
Depth of Stone in Lines 12
Water Supply: Individual (✓)
Public ( )

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY Kelly Sheeks R.S.

COMMENTS: Mobile home to be removed later. Under house is ok

CERTIFICATE OF COMPLETION BY Steve Brown

EXISTING SYSTEM CHECKED BY: _____ DATE 8-21-87

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL PERMIT REQUIREMENTS

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

JAN. 6, 1989 22:19