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 Duke Hedrick DATE 7/25/78 PERMIT NO. _____

PHONE: Business _____ Home _____

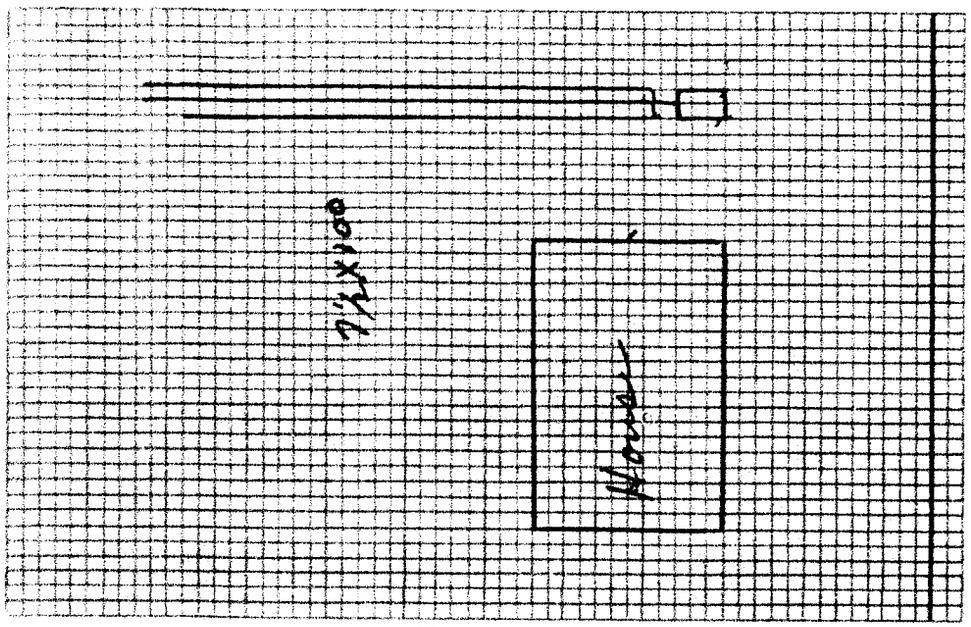
LOCATION Hwy #90 to Loray. T.R. on Rd #1548 - T.L. into Jo Moni Acres House on L. at Sharpe Curve S. R. No. _____

SUBDIVISION NAME Jo Moni Acres LOT NO. 105-106-107-108 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2
Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 100X200

Character & Porosity of Soil Prov Suitable
Percolation Rate _____
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. 250 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Harlee Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: Downspouts should be diverted away from septic tank + lines. This is important!

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 7/25/78

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