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 Fred D. Holbrook DATE 10/17/78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy # 90 To Loray. T.R. on Rd #1548. T.L. on 1648 House on L. S. R. No. _____

SUBDIVISION NAME Je Moni Acres LOT NO. 109-116 SECTION OR BLOCK NO. _____

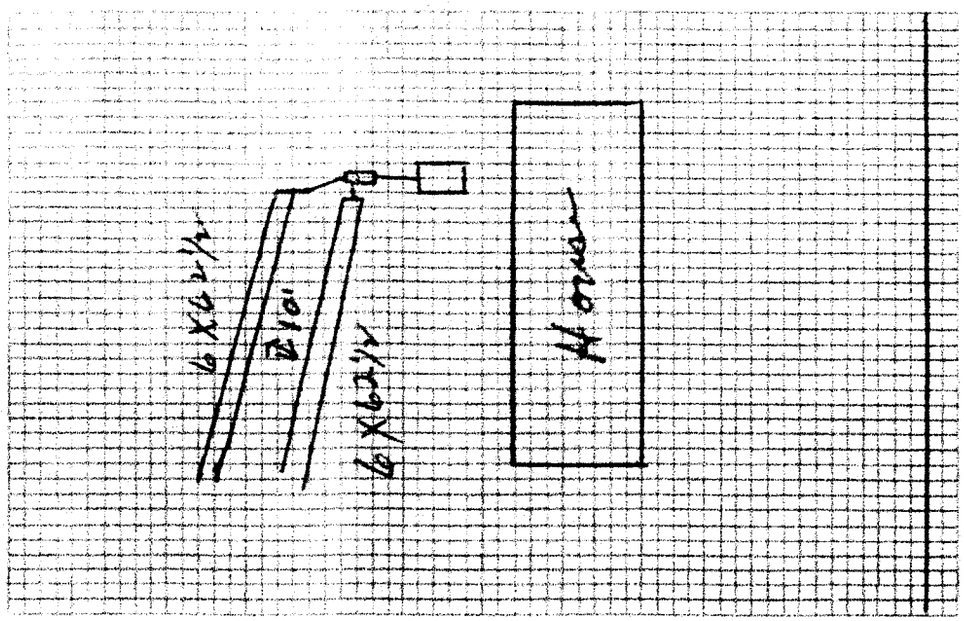
House (+) Mobile Home ( ) Business ( ) Other _____

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 40,000 Sq Ft

Character & Porosity of Soil Prof Suitable
Percolation Rate _____
Topography Slight Slope Low
Depth to Water Table _____
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines as shown
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (+)

Installed by Hoke Septic Tank

IMPROVEMENTS PERMIT BY _____

COMMENTS: Maple Tree near start of second ditch needs to be removed. All surface water possible needs to be diverted away from tank + lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 10/17/78

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