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 Larry Jenkins-Bldr DATE 5/17/78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Jo Moni Acres- House on Rt on Rd 1648

S. R. No. _____

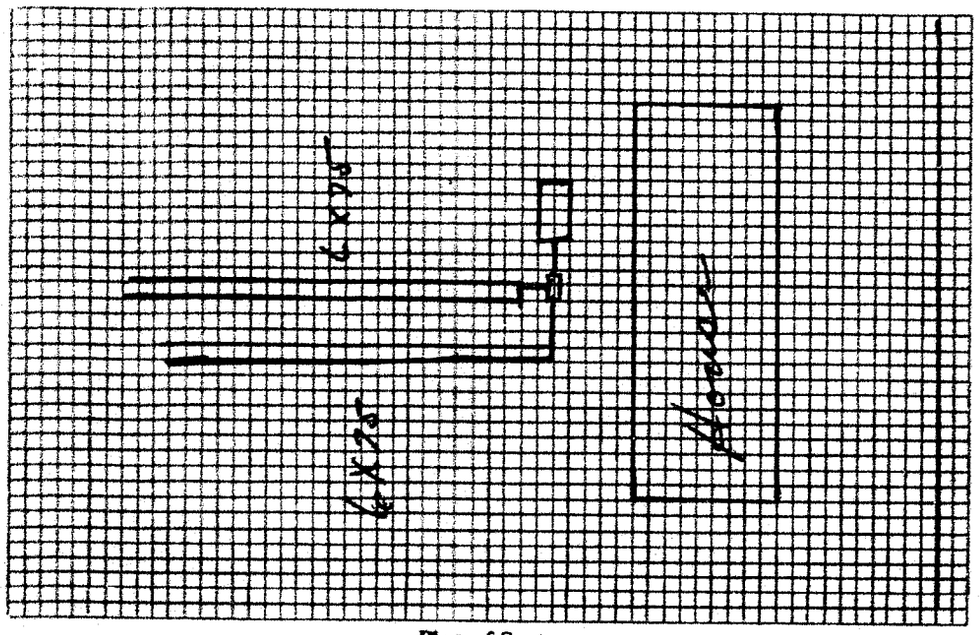
SUBDIVISION NAME Jo Moni Acres LOT NO. 21-25 SECTION OR BLOCK NO. _____

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 100X 200

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



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines As shown
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Eddie Young & Son

IMPROVEMENTS PERMIT BY _____

COMMENTS: Surface water should be diverted away from septic tank + lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 5/17/78

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