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IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

DATE 10-9-90 PERMIT NO. 145-A-80

OWNER OR CONTRACTOR Kenneth Jewell

PHONE: Business _____ Home _____

LOCATION 115 N TL Hills Dairy Rd TL Ex bottom Rt Cross Creek TL Gravel Rd (private) Stay Rt House at end of Rd Drive

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (✓)
Auto. Dishwasher	Yes (✓)	No ( )
Auto. Wash. Machine	Yes (✓)	No ( )
Site Suitable	Yes (✓)	No ( )

Character & Porosity of Soil Clay loam

Percolation Rate 4

Topography 2 to 20

Depth to Water Table 10'+

Rock or other impervious formations none

Lot Area 15 acres

(✓) Basement with Plumbing ____ Basement without Plumbing ____ No Basement

Size of Tank 1000 Gals.

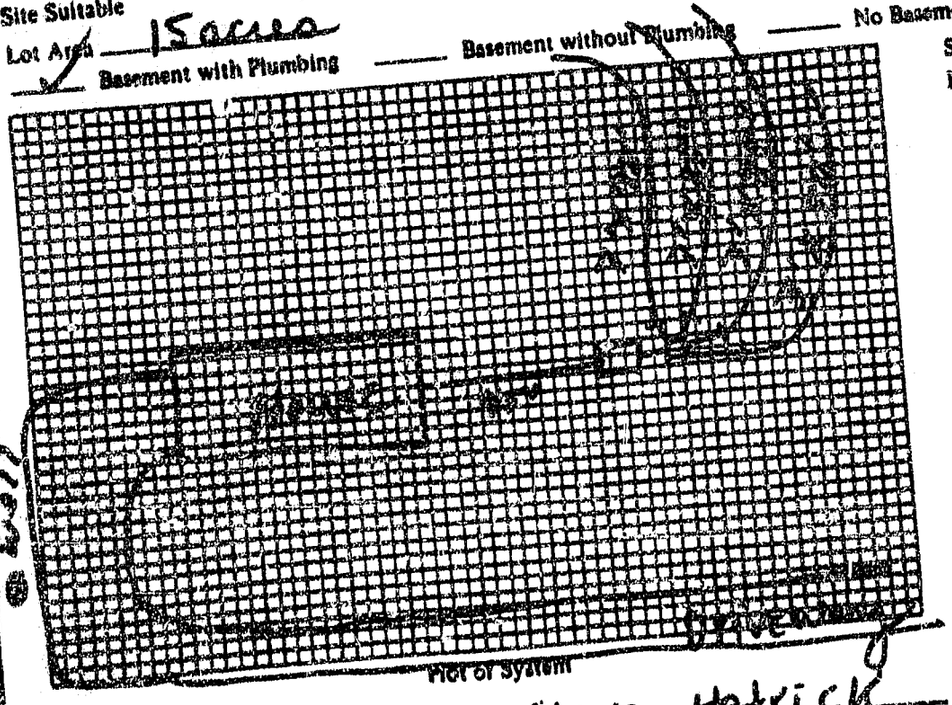
Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )



Installed by A-1 Backhoe

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Hedrick

COMMENTS: _____

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 10-F-90

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