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 CHURCH OF GOD OF PRAISE DATE 7-13-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 west, T.L. on Bristol Drive, go appr. of. 1/2 mi. on (r).

S. R. No. _____

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

House ( ) Mobile Home ( ) ~~Business (c)~~ CHURCH Other _____

No. Bedrooms _____ No. Bathrooms 2 + Kitchen

Garbage Disposal Unit Yes ( ) No (c)

Auto. Dishwasher Yes ( ) No (c)

Auto. Wash. Machine Yes ( ) No (c)

Site Suitable Yes (c) No ( )

Lot Area Ample

Character & Porosity of Soil Prev. Suitable

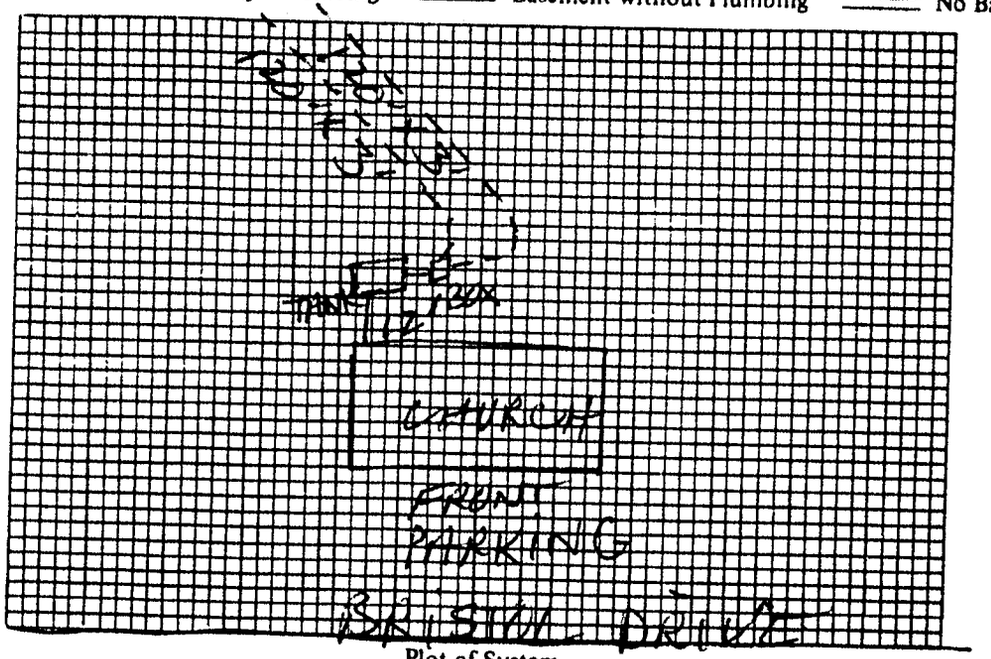
Percolation Rate Equal/sq ft.

Topography 2 to 8%

Depth to Water Table 4'+

Rock or other impervious formations none observed.

_____ Basement with Plumbing _____ Basement without Plumbing (c) No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (c)

Public ( )

Installed by Donald Lackey

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Do not pave or drive over S.T. system.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 7-13-84

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