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 Edd Menscer DATE 8-24-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N – TL on SR 1892 Jenning Rd – TL on RD # 1896 Friendship Ch. Rd) TL into private Rd before creek – 1st lot 200 ft R. No. _____

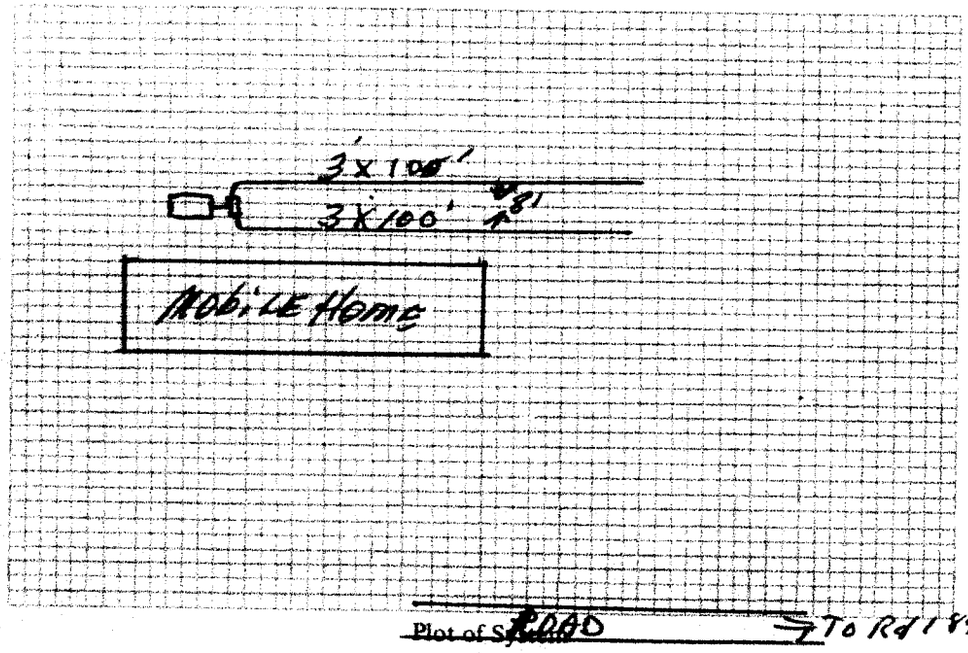
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sandy
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	Good
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6-10% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Unk
			Rock or other impervious formations	None

Lot Area _____



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Glenn Alexander

IMPROVEMENTS PERMIT BY _____

COMMENTS: System installed sup. owner did not move trailer system as permitted

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 8/24/78

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