01755

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 Jerry L. Kluegar DATE 3-20-85 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 2 1/2 - TL on SR 1892 (Jennings Rd) to Dead End - TL on SR 1896 (Friendship Rd) for 3/10 Mile - Log House on left S. R. No. 1896

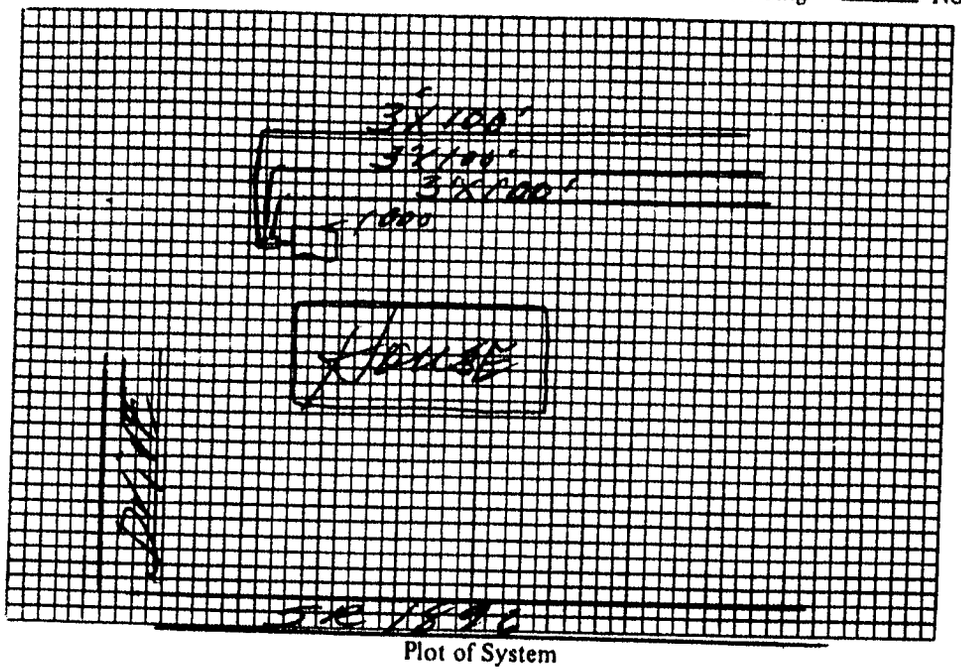
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay Loam Suitable
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	1 Inch Per Hour
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Gently Sloping
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6'
Lot Area	More		Rock or other impervious formations	None

___ Basement with Plumbing ___ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Jerry Davis

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steven T. Lee DATE 3/20/85

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