IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

1941

OWNER OR CONTRACTOR Bobby Christian DATE 5-31-89 PERMIT NO. 74

PHONE: Business _____ Home _____

LOCATION Jennings ll L Rich 2nd drive to Right past School

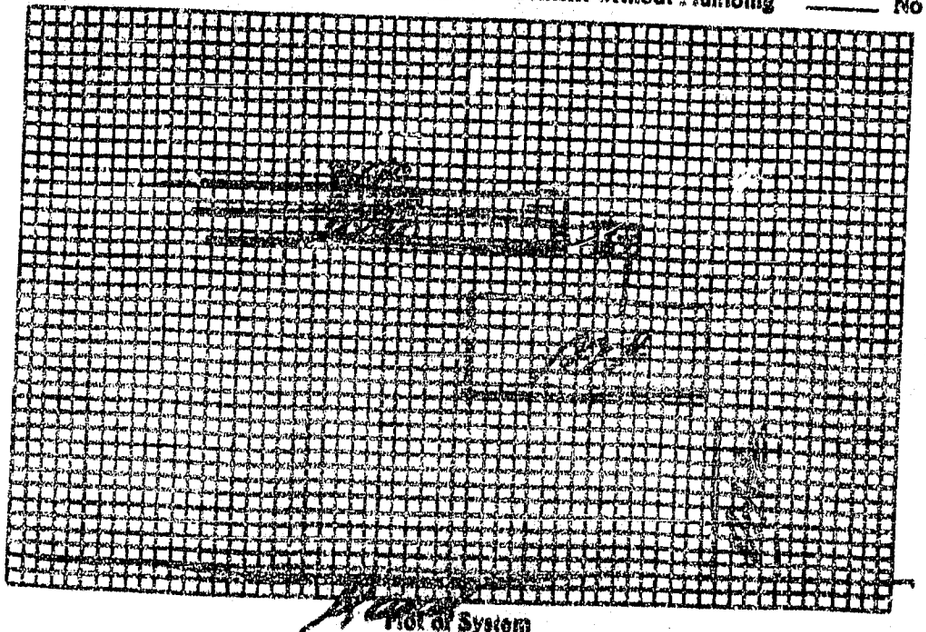
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Good Suitable
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	2
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10 ft
Lot Area 200 x 200			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 2
Sq. Ft. 300 Linear Ft. 50
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Bobby Plunk

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

Signed: _____

IMPROVEMENTS PERMIT BY [signature] Glenn Fox Jr

COMMENTS: Keep each line 100' from SI System if possible

CERTIFICATE OF COMPLETION BY [signature] DATE _____

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