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 Jimmy Lapish DATE 12-5-25 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70 E. TR on Rd # 2318 Cross Creek TR on Rd # 2358 TR 2nd dirt strut 1st Mobile Home on Left in Curve S. R. No. _____

SUBDIVISION NAME Lloyd Acres LOT NO. 15 SECTION OR BLOCK NO. _____

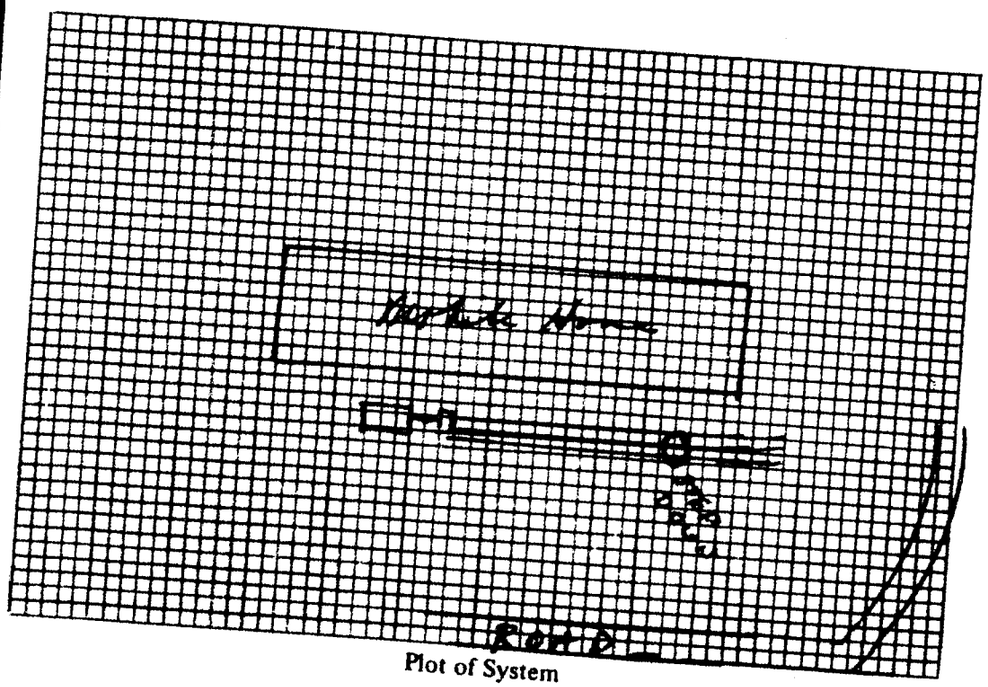
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 20,000

Character & Porosity of Soil Red Clay
Percolation Rate Slow
Topography Slope to front
Depth to Water Table 26+
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Raymond Adams

IMPROVEMENTS PERMIT BY _____

COMMENTS: Stop down on System - Should have been installed in area of driveway owner proposed to change.

CERTIFICATE OF COMPLETION BY Glenn Ford Jr. DATE _____

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