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 Jett Anderson DATE 9-14-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Lot 3 - Neely Greene

S. R. No. _____

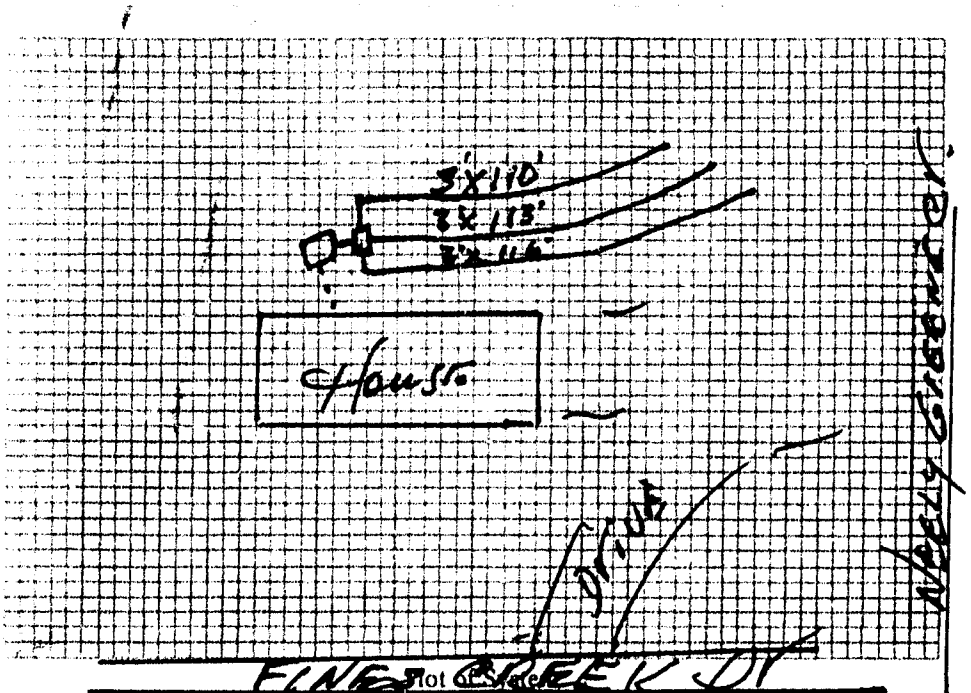
SUBDIVISION NAME Neely Greene LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 2½

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area Approx 1 Acre

Character & Porosity of Soil Sandy Clay Loam
Percolation Rate 5 gal. Satisfactory
Topography 2-6 % Slope
Depth to Water Table 10'+
Rock or other impervious formations None



Plot or Sketch

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1017 Linear Ft. 339
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Silas Lytton

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

Signed: _____

IMPROVEMENTS PERMIT BY J.C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J.C. Moore + Silas Lytton DATE 9/14/83

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