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 Church of Jesus Christ of Latter Day Saints DATE 3-3-82 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION corner of Jane Sowers & Crawford Rd S. R. No. _____

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

House ( ) Mobile Home ( ) Business ( ) Other Addition to Church Gym, office, & kitchen

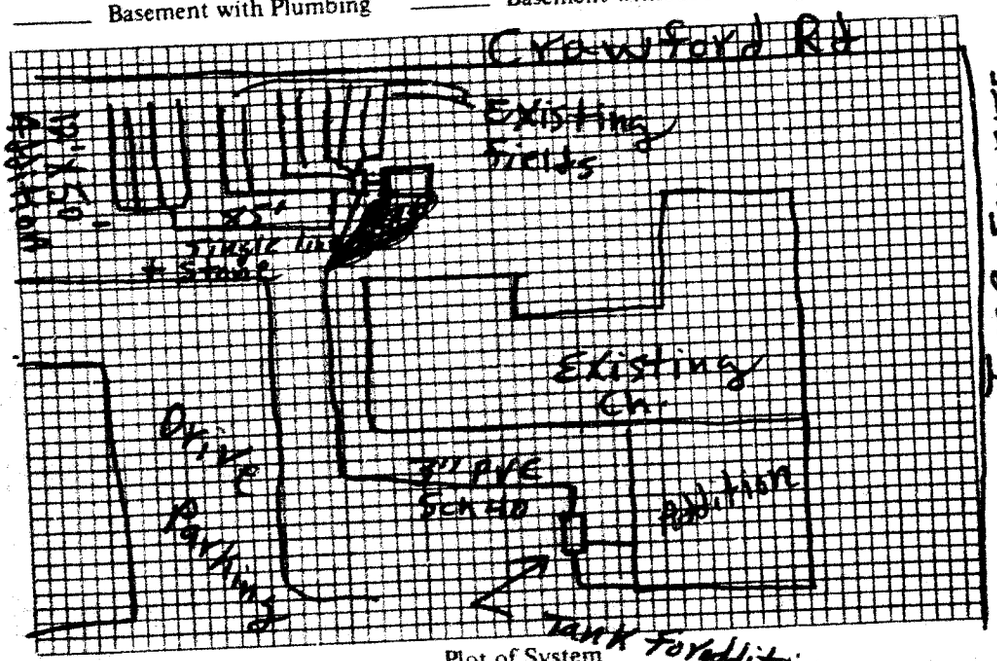
No. Bedrooms _____ No. Bathrooms _____

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

Character & Porosity of Soil cecil clay
Percolation Rate 1" to 16 gal / 55 gal / day
Topography 2 to 6 - 20 Slope
Depth to Water Table 10'+
Rock or other impervious formations none

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 24 to 30"

Water Supply: Individual ( )
Public (✓)

Installed by Henry Sigmon

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

Signed: _____

Solid line from Septic Tank for addition to original Tank has 3' of drop.

IMPROVEMENTS PERMIT BY P. C. Moore

COMMENTS: original system works first then effluent will spill over to new drain lines if necessary.

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 3-3-82

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