IREDELL COUNTY HEALTH DEPARTMENT

7936 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Jeff Horne DATE 7/88 PERMIT NO.

PHONE: Business Home

LOCATION 21 N TR on Jane Sower TL on Baymount Dr round curve lot left S. R. No.

SUBDIVISION NAME Baymount LOT NO. 1 SECTION OR BLOCK NO.

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

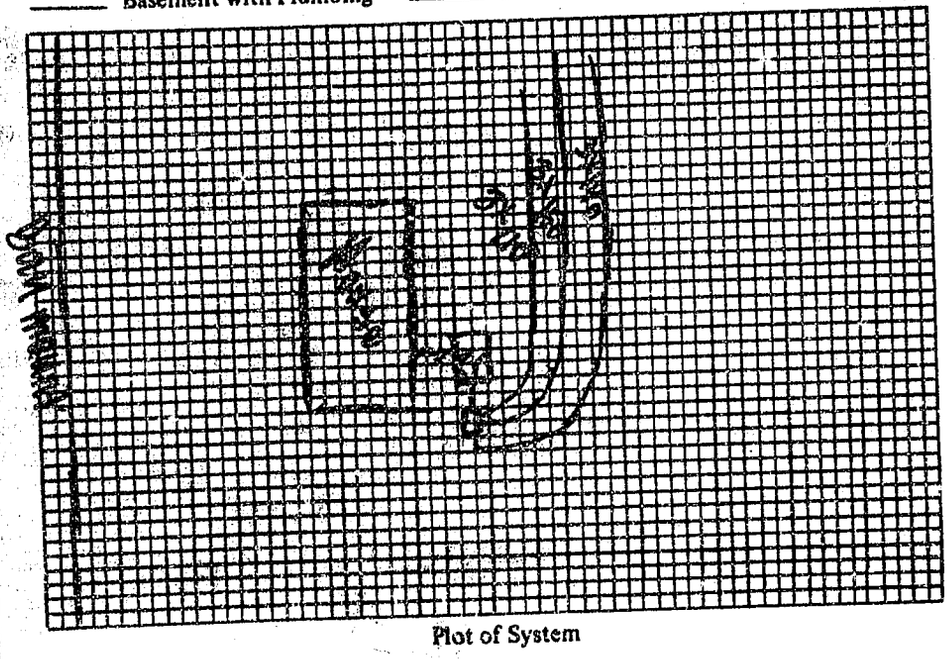
No. Bedrooms 4 No. Bathrooms 2 1/2

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

Lot Area 1.39

Character & Porosity of Soil Clay loam
Percolation Rate 24
Topography 2 to 6%
Depth to Water Table 10'+
Rock or other impervious formations none

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1600 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public (✓)

Installed by Al Backhoe

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

Signed: _____

IMPROVEMENTS PERMIT BY JC Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D Vincent JC Moore DATE 7/88

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