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 McKinney Reality DATE 6-19-79 PERMIT NO. _____

PHONE: Business _____ Home _____

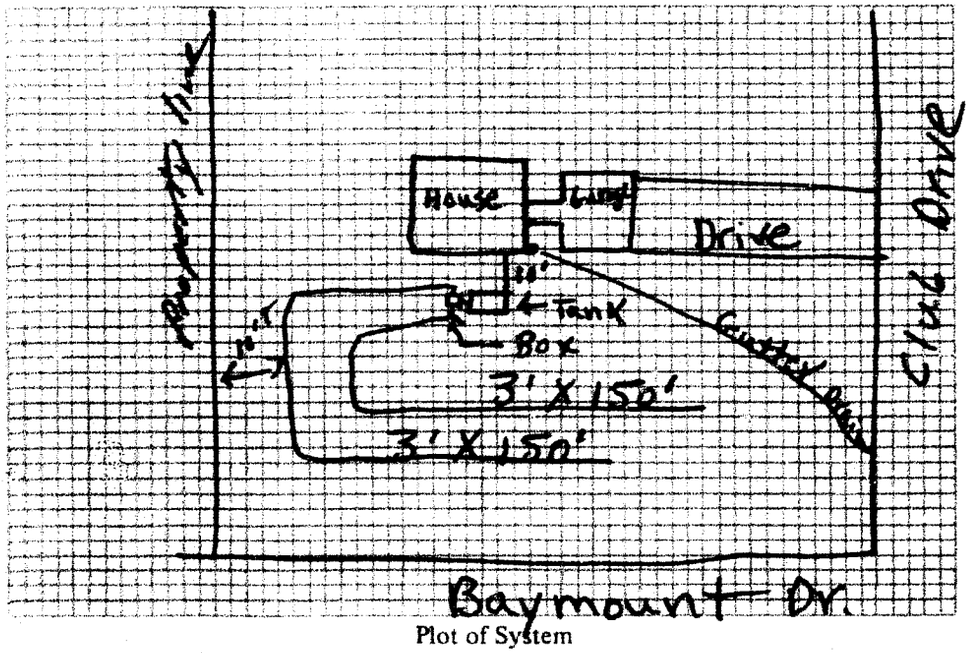
LOCATION Jane Sowers Road TL on Baymount Dr. on cornor of Club Drive S. R. No. _____

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

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

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Cecil Fine Sandy Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	80 min/inch
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2 to 4% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+
Lot Area 1 acre			Rock or other impervious formations	none



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Harlee Lackey

IMPROVEMENTS PERMIT BY R. C. Moore

COMMENTS: Landscape & Pipe Gutters so water will not be ran into area of System

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 6-19-79

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