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 Paul Monday DATE 7/11/79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Jane Sowers Rd, T.L. into Baymont, T.R. at first Rd, at Big bend in road in field S. R. No. _____

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

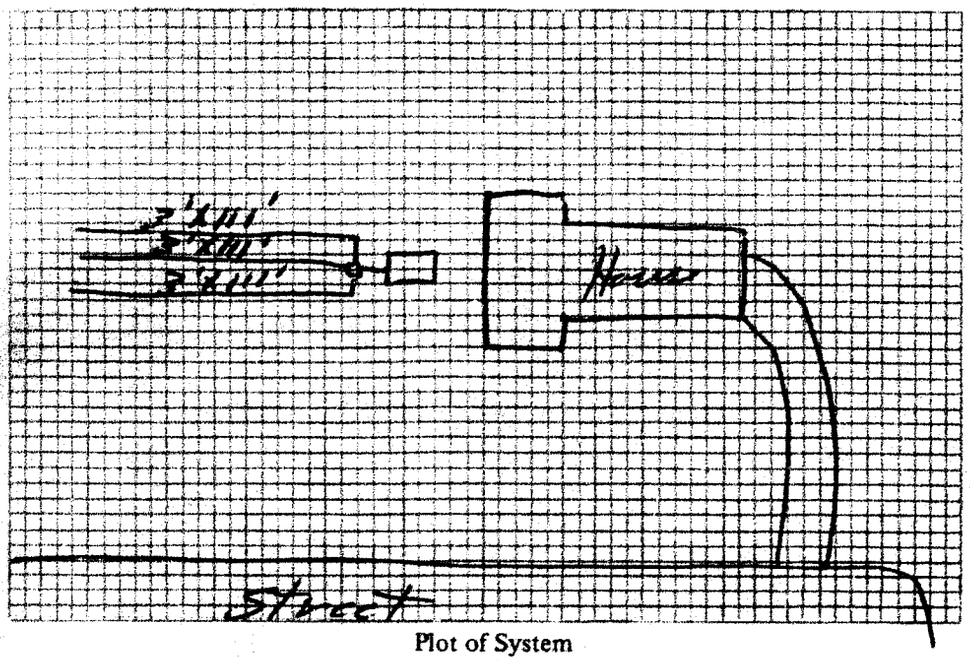
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 3

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

Lot Area 10 acres

Character & Porosity of Soil Cecil, Fine Sandy Clay
Percolation Rate 8E min/inch 9E. Inch 6
Topography 2-6 To slope
Depth to Water Table 10+
Rock or other impervious formations none



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1000 Linear Ft. 333
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Hoke Septic Tank Co.

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew E. Caney DATE 7/11/79

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