IREDELL COUNTY HEALTH DEPARTMENT

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

9558

OWNER OR CONTRACTOR Jeff Church DATE 4-24-87 PERMIT NO. 87

PHONE: Business _____ Home _____

LOCATION 70N R Turnersburg Mill Rd Falcon Rd on drive in Curve Shovel Mallard S. R. No. _____

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

House ( ) Mobile Home (✓) Business ( ) Other Use in Future

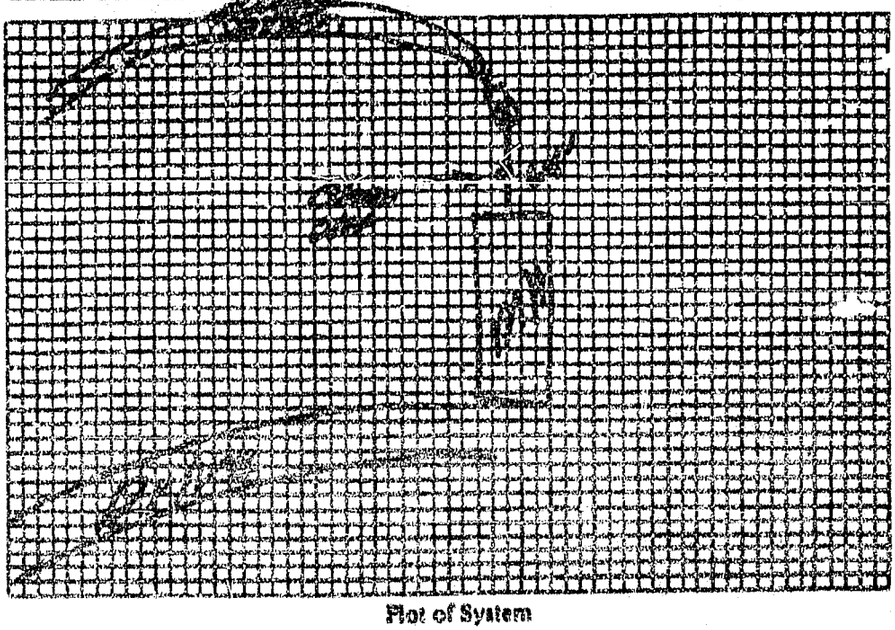
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Loamy Sandy
Percolation Rate 24
Topography Rolling
Depth to Water Table 10'+
Rock or other impervious formations Scattered Rock

Lot Area Ample

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 300 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Jeff Church

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

Signed: _____

IMPROVEMENTS PERMIT BY [signature]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 4-24-87

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