1246 36623

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 Jack St John DATE 6-8-90 PERMIT NO. SAN-42-12

PHONE: Business _____ Home _____

LOCATION Bellwood Dr. 2nd Entrance 1st House on left.

S. R. No. _____

SUBDIVISION NAME Bellwood LOT NO. 12 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2½

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

Lot Area .5 Acres

Character & Porosity of Soil Clayey
Percolation Rate 3
Topography Sloping
Depth to Water Table 10'+
Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

Size of Tank 1000 S.T. 1000 P.T. Gals.

Nitrification Field:
No. of Lines 5
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Plot of System

Installed by A-1 Backhoe

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

Signed: _____

Pump & Alarm to be wired to Iredell Co Building Insp. standards

IMPROVEMENTS PERMIT BY E. C. Moore

COMMENTS: lot needs to be landscaped so that surface water is diverted around system & not over it.

CERTIFICATE OF COMPLETION BY E. C. Moore DATE 6-8-90

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