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 Boyd Jarvis DATE 30 of 74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Statesville Country Club. Turn Right of E Broad St. on 21-16. Agusta Dr. - Go to Westward St. on Left. 1st house on Right S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ 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 170' X 220'

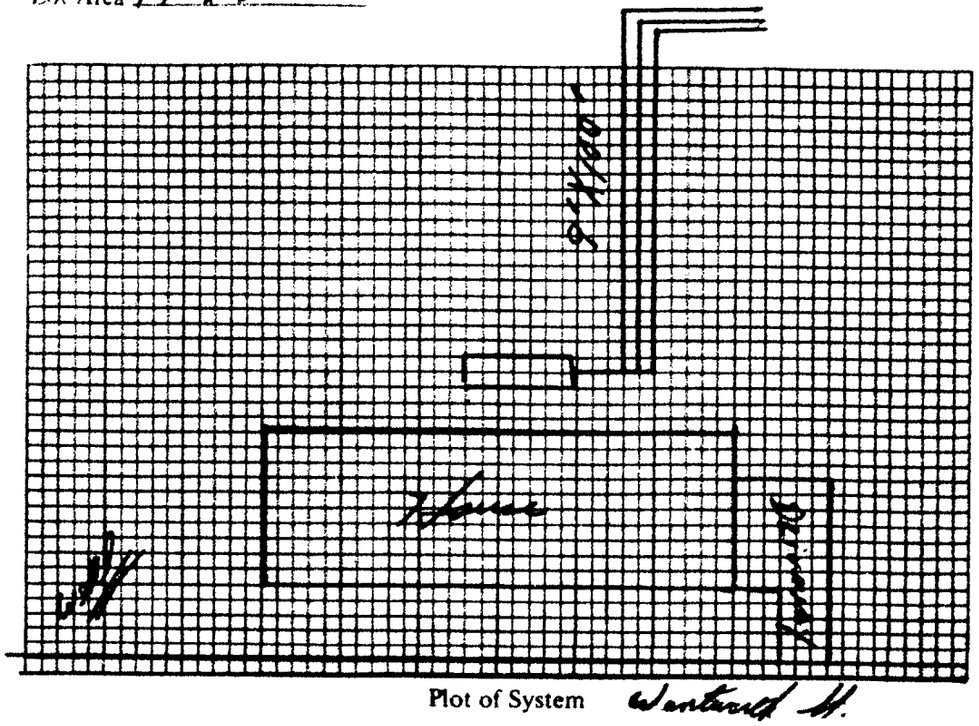
Character & Porosity of Soil Coal Clay

Percolation Rate Good

Topography Right Slope to Left of house

Depth to Water Table nil

Rock or other impervious formations nil



Plot of System Westward St.

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10" plus

Water Supply: Individual (✓)
Public ( )

Installed by Jon Oswalt

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY W.M. Howard DATE 10 OCT 74

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