04266

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 James A. Smith DATE 5-1-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION W/S Cross Old Mocksville Rd & Chris Thomas Rd

S. R. No. _____

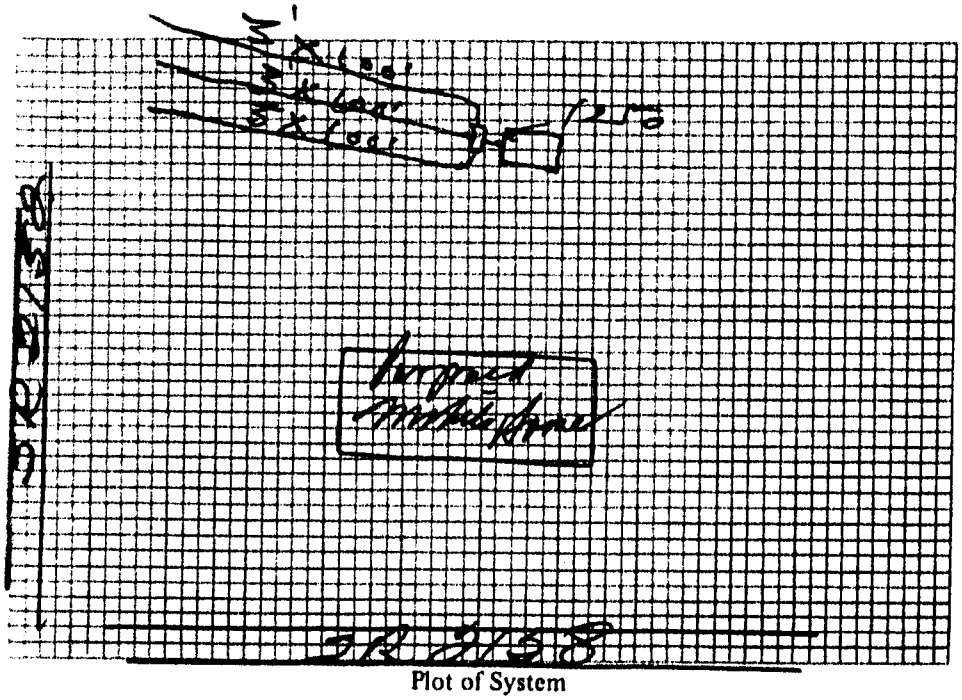
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home (✓) Business ( ) Other Permit for Home Later

No. Bedrooms 3 No. Bathrooms 4

Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )
Lot Area 3 Acres

Character & Porosity of Soil Red - Suitable
Percolation Rate 2 - 60 Min.
Topography Gentle Slope
Depth to Water Table 40'
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 200 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Darrell Lakey

IMPROVEMENTS PERMIT BY _____

COMMENTS: Mobile Home — House to be built Later

CERTIFICATE OF COMPLETION BY _____ DATE 5/1/86

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