IREDELL COUNTY HEALTH DEPARTMENT

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

#292

OWNER OR CONTRACTOR Jimmy A. Powers DATE July 6, 1990 PERMIT NO. C-8

PHONE: Business _____ Home _____

LOCATION 21N TR on Mt. Bethel Rd. TL into Bethel Park Go. Approx ½ mi TL to MH site

SUBDIVISION NAME Bethel Park S. R. No. _____

LOT NO. 23 SECTION OR BLOCK NO. _____

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

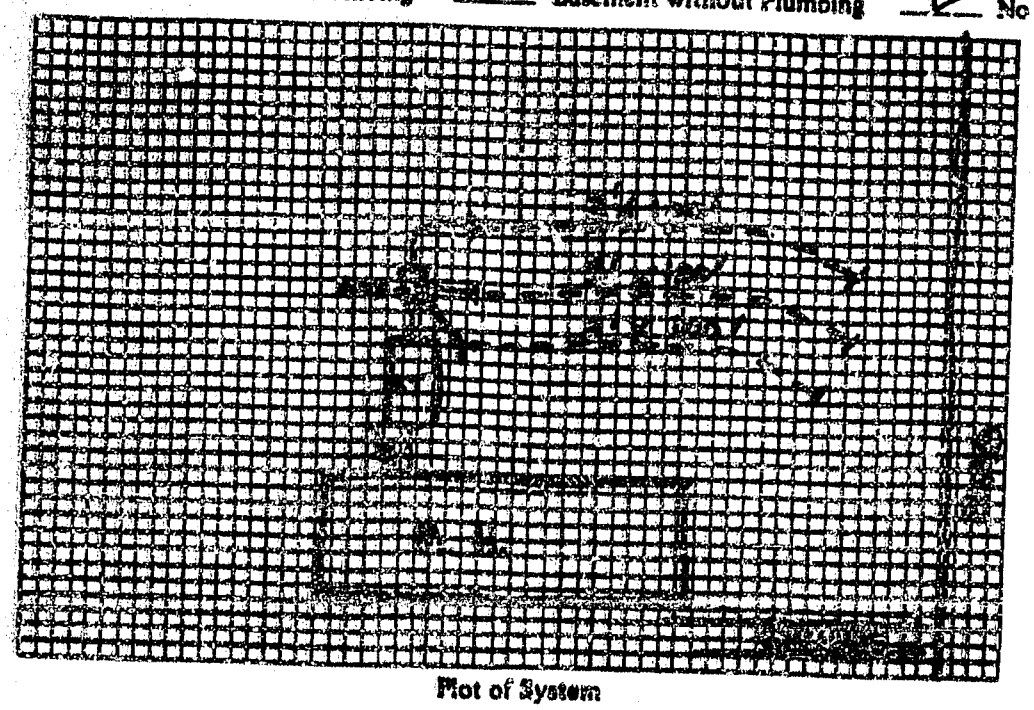
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area _____

Character & Porosity of Soil Prov. Suitable
Percolation Rate 4
Topography 2-6%
Depth to Water Table 10'
Rock or other impervious formations None Noted

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 180 Linear Ft. 300
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Sammy Bevis

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

Signed: _____

IMPROVEMENTS PERMIT BY Glenn Fox, Jr.

COMMENTS: Keep well minimum 50' from tank & lines

CERTIFICATE OF COMPLETION BY _____ DATE 7/6/90

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