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 Harmony Grove AME Zion Church DATE 1-5-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Harmony - 9012. TL on SR 2128 - TL at first paved Rd - Church approx 1/4 Mile on Rt. S. R. No. 2128

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

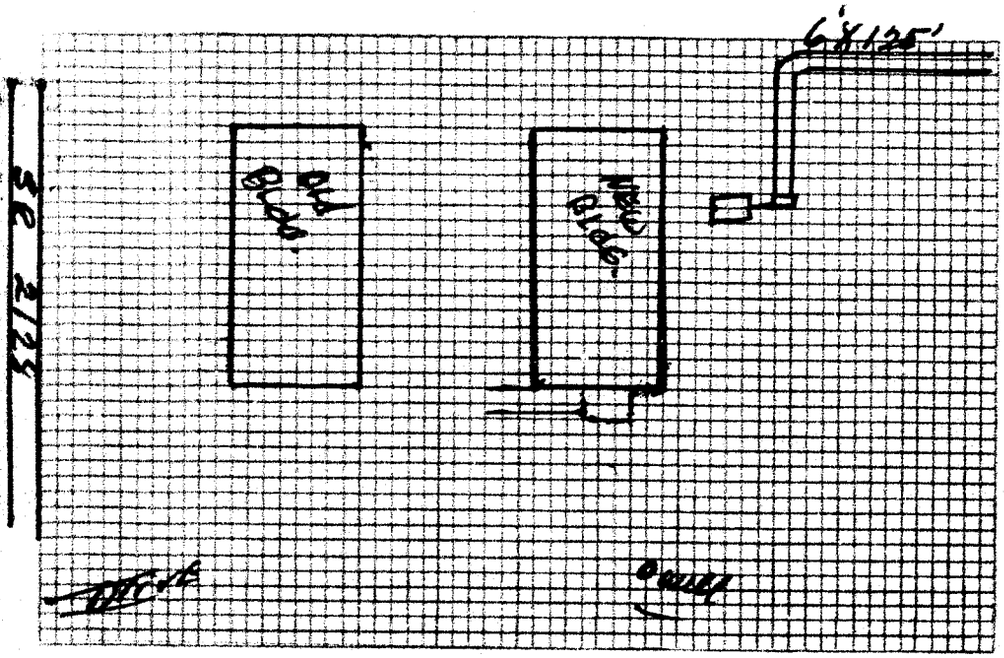
House ( ) Mobile Home ( ) Business ( ) Other Church Approx 60 Members

No. Bedrooms C 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 Tirzo Suitable Cecil Clay
Percolation Rate _____
Topography 2 - 6% Slope
Depth to Water Table _____
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 180 Linear Ft. 250
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Mina Grove ST. & Septic Sta Tank

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 1/5/79

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