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 Carl Lentlen DATE 26 Sept 74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Jennings Rd to 801. T.C. to 1st driving on right past Mossman Ridge. House left Rd opposite Yard one S. R. No. _____

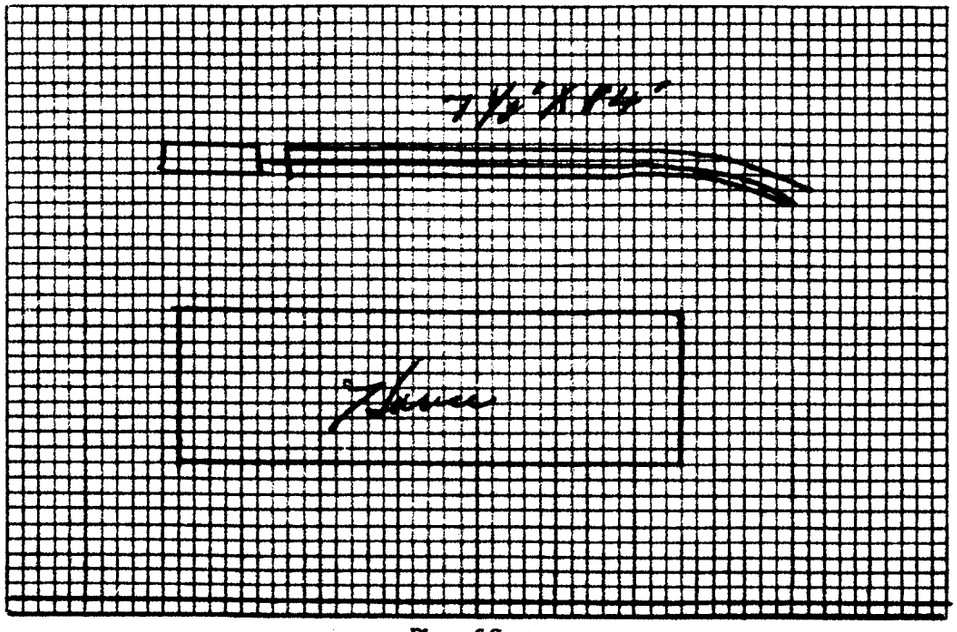
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Clay Loa	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	none	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope to rear of house	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	unk	
			Rock or other impervious formations	unk	

Lot Area _____



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )
Water from another house.
Installed by James Thornton

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wm Thomas DATE 26 Sept 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