02332

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 Noah Gregory DATE 12-14-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N. T.L. on Jennings Rd. T.L. on SR 1880 (Mt. Vernon) Cross Creek 1st mobile home on left

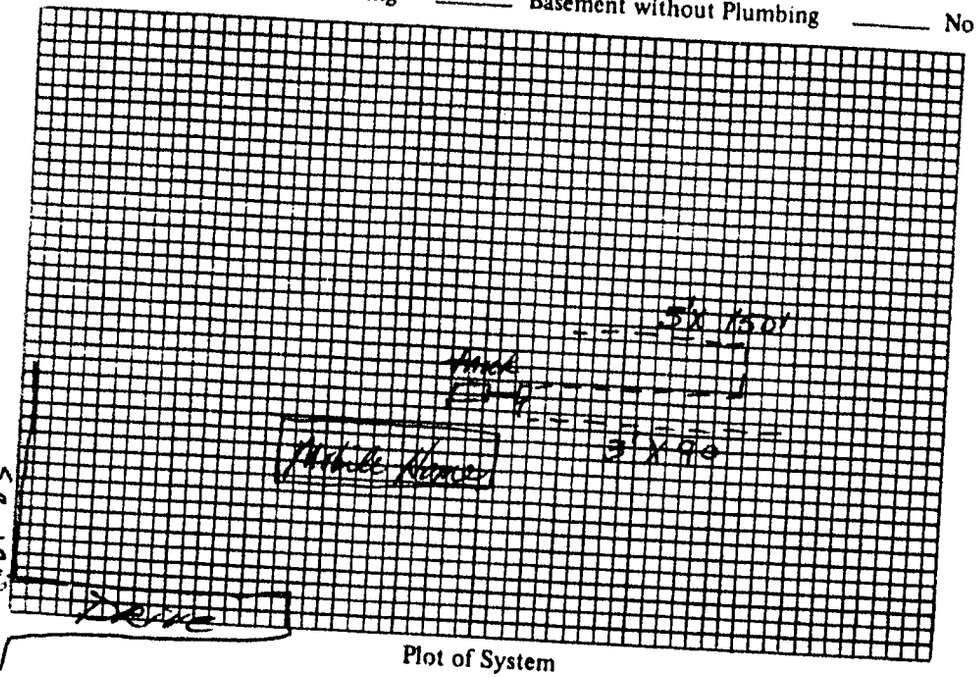
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. 1880

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Class III
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	1.5 gal/ft²/day
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-6% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'+
Lot Area Acreage			Rock or other impervious formations	None

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY Glenn Fox Jr.

COMMENTS: Changed from original layout (11-15-84). Landscape over lines to provide adequate cover and no low areas that water will stand in.

CERTIFICATE OF COMPLETION BY Tony K Fussell

EXISTING SYSTEM CHECKED BY: _____ DATE 12-14-84

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE _____

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