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 Jerry Ball DATE 22 Aug 75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Jamesville Rd N to NC 1891 on Right - L to Obie - T.R. on NC 1887. to L on NC 1888 on Right - 3/4 mi on Rt - Brick House - S. R. No. _____

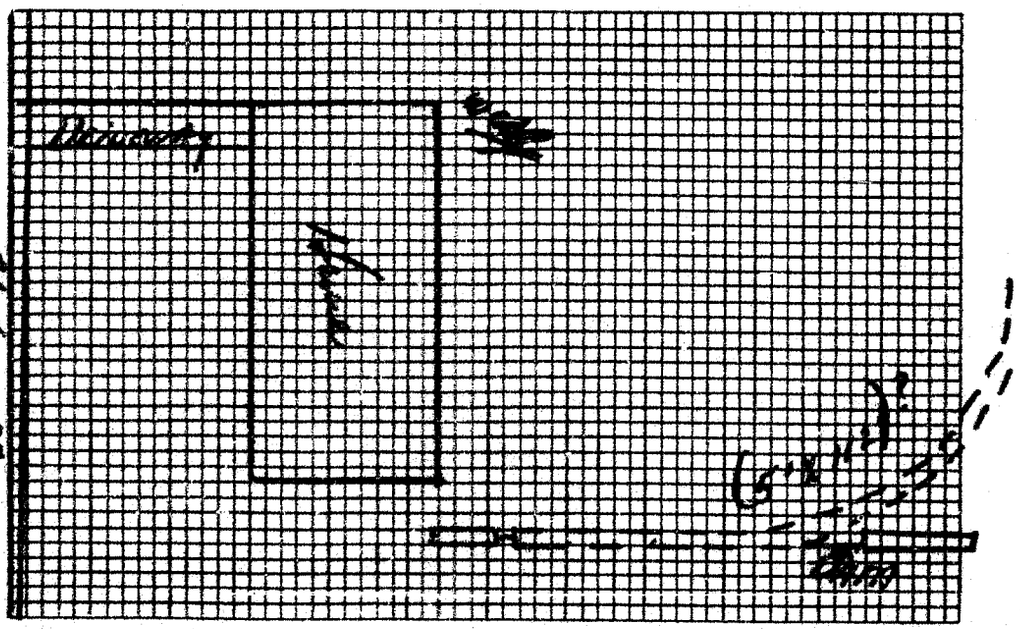
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sand Clay	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	None	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope to rear house	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6'	
			Rock or other impervious formations	None	

Lot Area _____



Plot of System

Size of Tank Precast Gals.

Nitrification Field:

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by Henry Lyons

IMPROVEMENTS PERMIT BY _____

COMMENTS: Septic tank shallow - shallow part in fill dirt. Downspouts should be diverted away from system. 1250 gal - 2"X14"X14" 18 runs stone - extra dirt spread over shallow part of system. Drop - approx 3" rise

CERTIFICATE OF COMPLETION BY Wm Howard DATE 22 Aug 75

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