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 Friendship Baptist Church DATE 10 Oct 16 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 115 N thru Statesville - Cumbo Rd off Hwy 115 N on left passing Powell Building on _____ S. R. No. _____

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

House ( ) Mobile Home ( ) Business ( ) Other Church

No. Bedrooms _____ No. Bathrooms 4

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

Lot Area _____

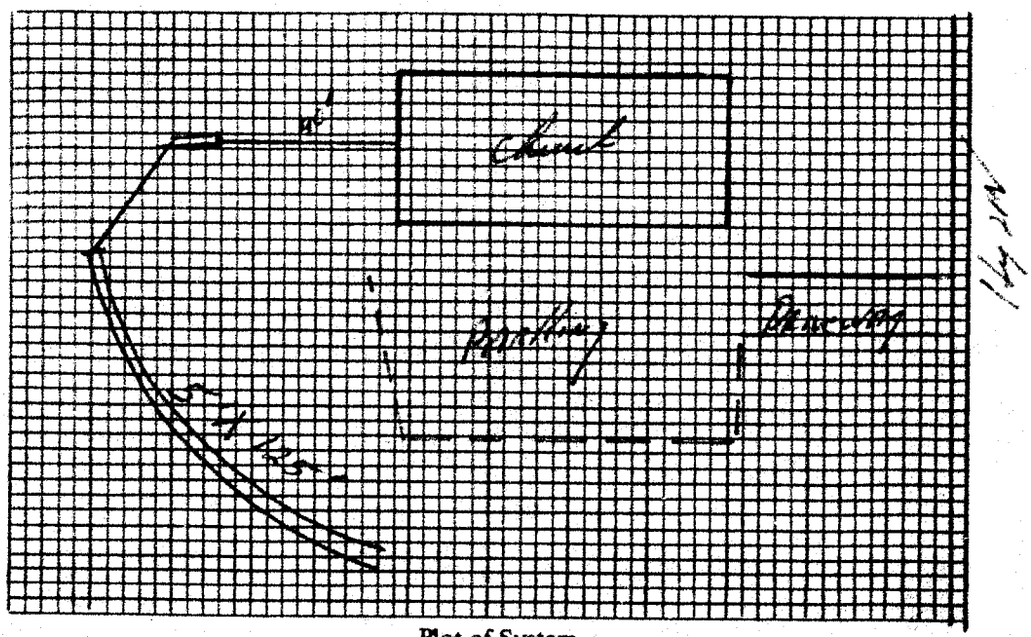
Character & Porosity of Soil Cecil Clay Loam

Percolation Rate 60 min

Topography 2-6 % slope

Depth to Water Table NE

Rock or other impervious formations NE



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public ( )

Installed by Sonny Reavis

IMPROVEMENTS PERMIT BY _____

COMMENTS: Took 40' from bldg line to provide further expansion if ever felt nec

CERTIFICATE OF COMPLETION BY _____ DATE 4 Nov 16

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