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 W. Sharpe DATE 8-23-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I40-To Sharon School Rd. T.R. – T.L. on Rd 1500 at Sipes American Sec. Go approx 1 mile to House on R. S. R. No. 1500

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

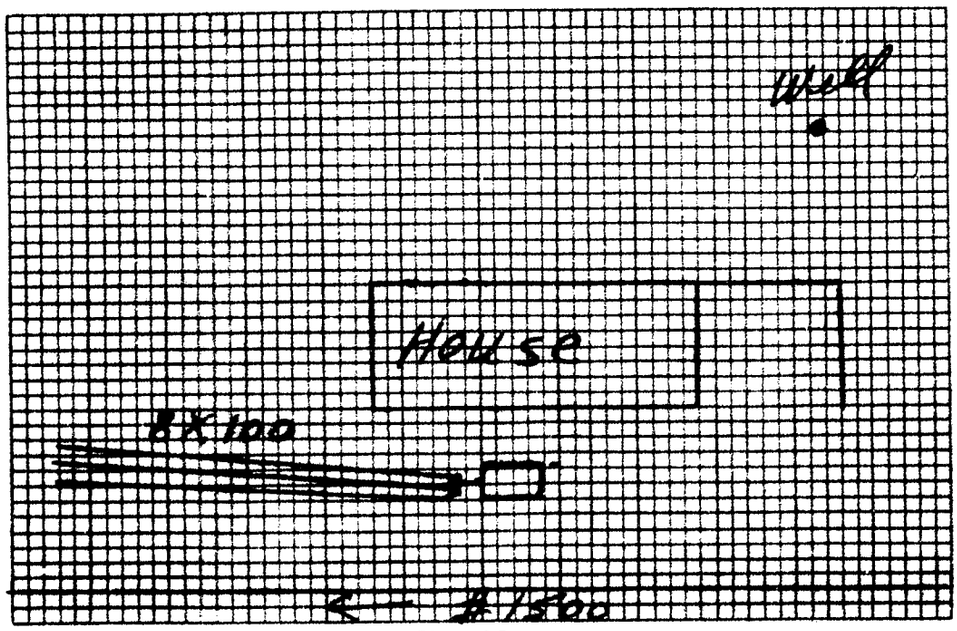
House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

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

Lot Area 1 9 Acre

Character & Porosity of Soil Red Clay
Percolation Rate Satisfactory
Topography Gobd & Low
Depth to Water Table _____
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 800 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Robert Hobe
R.E. Four

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well More Than 100' away.

CERTIFICATE OF COMPLETION BY E. G. Stevenson DATE 8-23-74

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