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 WILSON MITCHELL DATE 10-23-86 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Sharon School Rd. north of I-77 past Sharon Supermarket T.L. on Gun Club Rd - approx. 1/2 mile on left - double wide.

SUBDIVISION NAME _____ LOT NO. _____ S. R. No. _____

SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 2

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

Lot Area 1/2 acre +

Character & Porosity of Soil Appr. Suitable

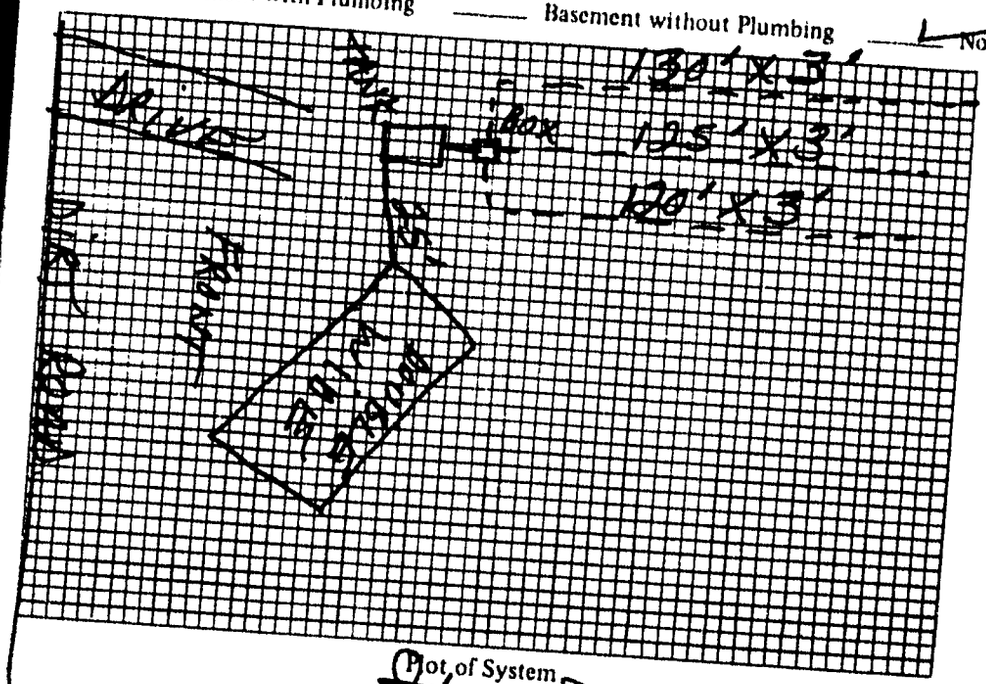
Percolation Rate 30 min/1" ft.

Topography 2-6%

Depth to Water Table 10'+

Rock or other impervious formations None impervious.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1125 Linear Ft. 375

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Amer Alexander

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

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Keep well at least 50' from S.T. system.

CERTIFICATE OF COMPLETION BY Steve Brown

EXISTING SYSTEM CHECKED BY: _____ DATE 10-23-86

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