Allie Robertson Bldr.

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 Ray McNeely DATE 2/3/79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Sharon School Rd above Sharon Super Mkt. 2nd House on Rt. Past Rd # 1526

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area Acreage

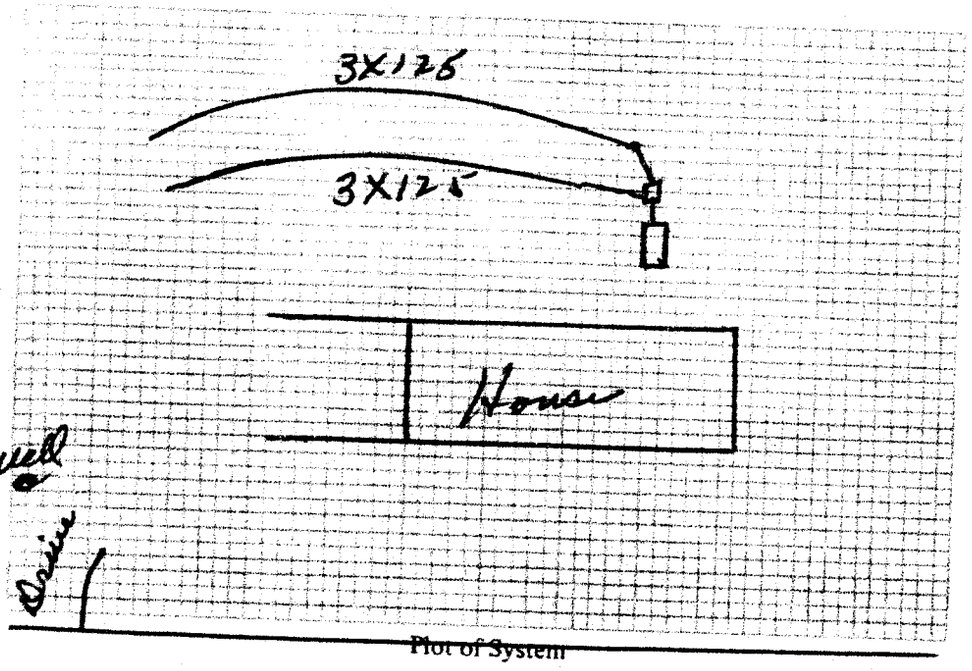
Character & Porosity of Soil Prod Suitable

Percolation Rate _____

Topography Slope Low

Depth to Water Table _____

Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Harlan Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: Water from downspouts + all surface water possible should be diverted away from Tank + lines. Water terrace should be leveled + sloped away from lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 2/3/79

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