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 Jim Kyles DATE 4-30-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 To Sharon School Rd. T.R. T.R. on 1501 - Tk. on 1654 2nd House on L. Past Sharp Curve

SUBDIVISION NAME Sharon Colony LOT NO. _____ S. R. No. _____ SECTION OR BLOCK NO. _____

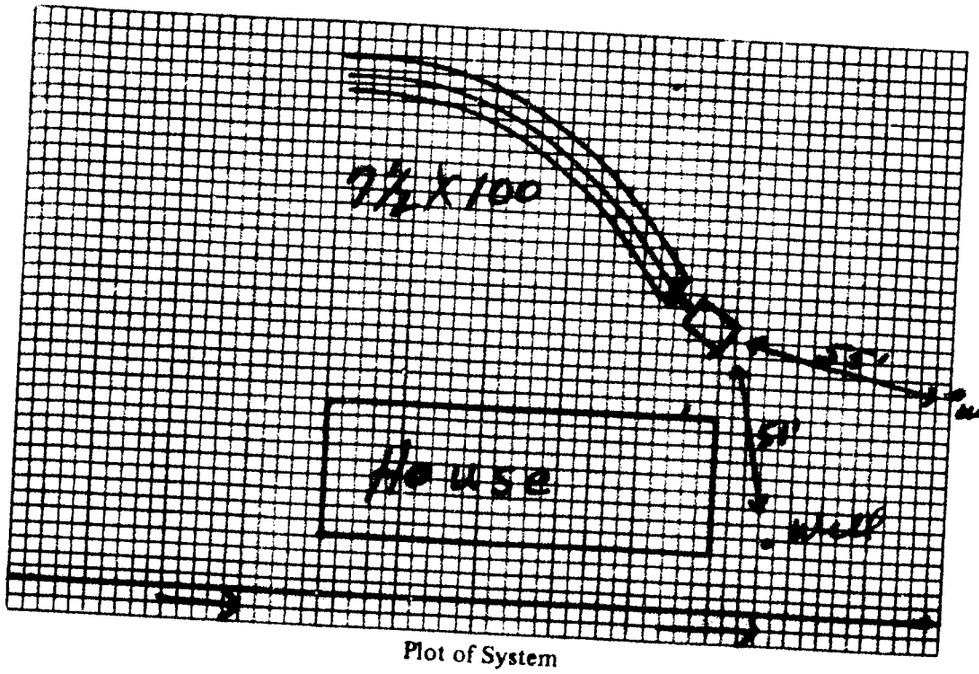
House (✓) Mobile Home ( ) Business ( ) Other _____

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 20,000 Sq ft +

Character & Porosity of Soil Red Clay
Percolation Rate No Perk Test
Topography Slope to back
Depth to Water Table Low
Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Robert Hall
R.E. Foy

IMPROVEMENTS PERMIT BY E. A. Stevenson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 4-30-74

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