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 Campbell DATE 5-15-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 to Sharon School Rd. T.L. 40 1/2 mile House on L. S. R. No. _____

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

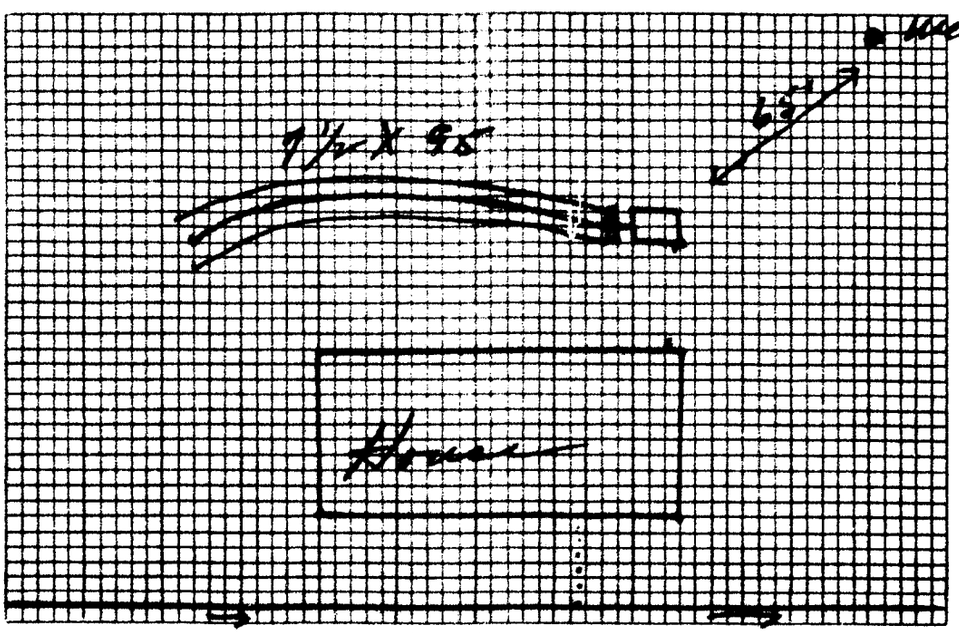
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 2 Acres

Character & Porosity of Soil Clay Loam
Percolation Rate _____
Topography Slope to rear
Depth to Water Table [redacted] Low
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 712½ Linear Ft. 285
Depth of Stone in Lines _____
Water Supply: Individual (✓)
Public ( )

Installed by Self.

IMPROVEMENTS PERMIT BY W. M. Howard

COMMENTS: Water from Downspouts should be diverted away from Tank + line

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 5-15-75

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