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 Hayes DATE 2 Nov 73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90 to Stony Point - Turn left behind Stony Point Furniture 1st street on left. (Double-wide) S. R. No. _____

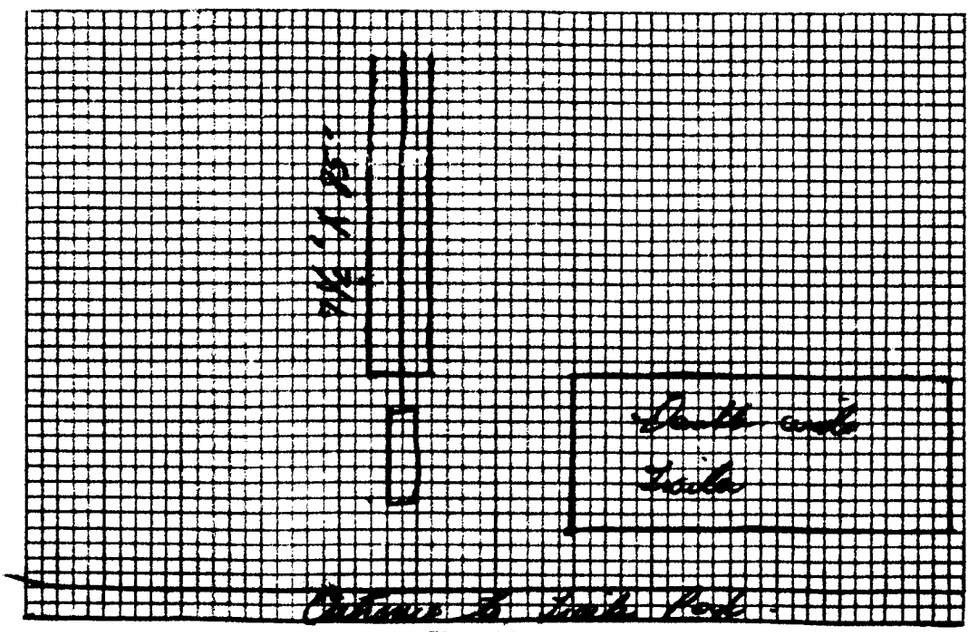
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Yellow brownish clay - some gravy
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	fair
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	slight slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	very close - 2-3 ft.
			Rock or other impervious formations	none given rock

Lot Area _____



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 637½ Linear Ft. 255
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Lakey Brothers

IMPROVEMENTS PERMIT BY _____

COMMENTS: Septic Tank installed in very marginal soil. Low area with 2-3 ft of water table. Must be well drained and maintained properly.

CERTIFICATE OF COMPLETION BY William M. Howard DATE 2 Nov 73

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