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 Guy Chatham DATE 11-23-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy #90 Above Scotts T.R. on Midway Drive #1554 T.L. on Rd #1565. Go approx ¾ mile Trailer on L. S. R. No. _____

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

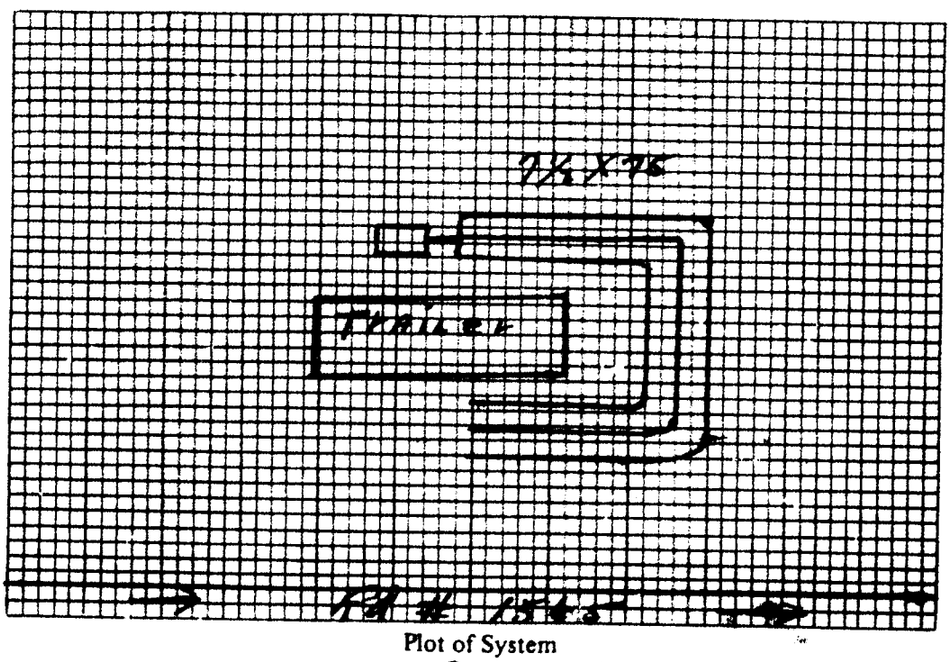
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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 Red Clay
Percolation Rate No Perk Test
Topography Slightly Sloping to back Lot
Depth to Water Table _____
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 562½ Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Lackey Bro

IMPROVEMENTS PERMIT BY E. A. Stevenson

COMMENTS: Well to be 100' from Tank and Line.
Well Not down at time of inspection

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 11-23-73

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