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 Parks Wilburn DATE 6-17-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy #90, T.R on 1554 Near Chapmans Garage, T.L on #1565, Trailer on left S. R. No. 1565

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

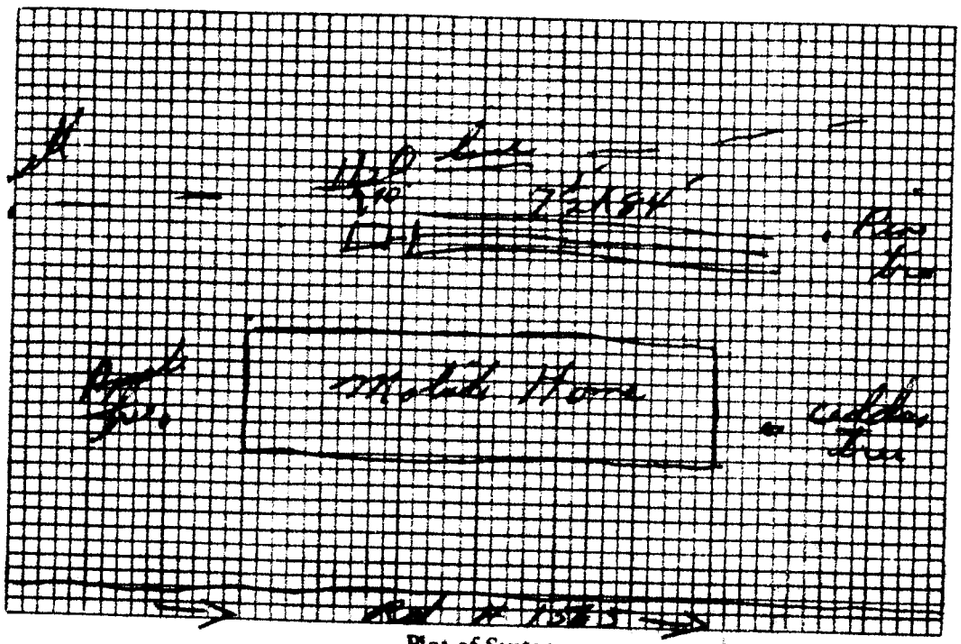
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

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 Red Clay
Percolation Rate 120 min per inch
Topography Slight to rise
Depth to Water Table Good
Rock or other impervious formations none noted



Plot of System

Size of Tank 1,000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10
Water Supply: Individual (✓)
Public ( )

Installed by Donald Barker
System for 1 Trailer only

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew E. Conway DATE 6-12-74

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