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 James Wooten DATE 12-6-78 PERMIT NO. 34

PHONE: Business _____ Home _____

LOCATION 1100 TR on 1115 TR on 2nd 1455, 1st Lot on Left S. R. No. _____

SUBDIVISION NAME LM LOT NO. 213 SECTION OR BLOCK NO. 8

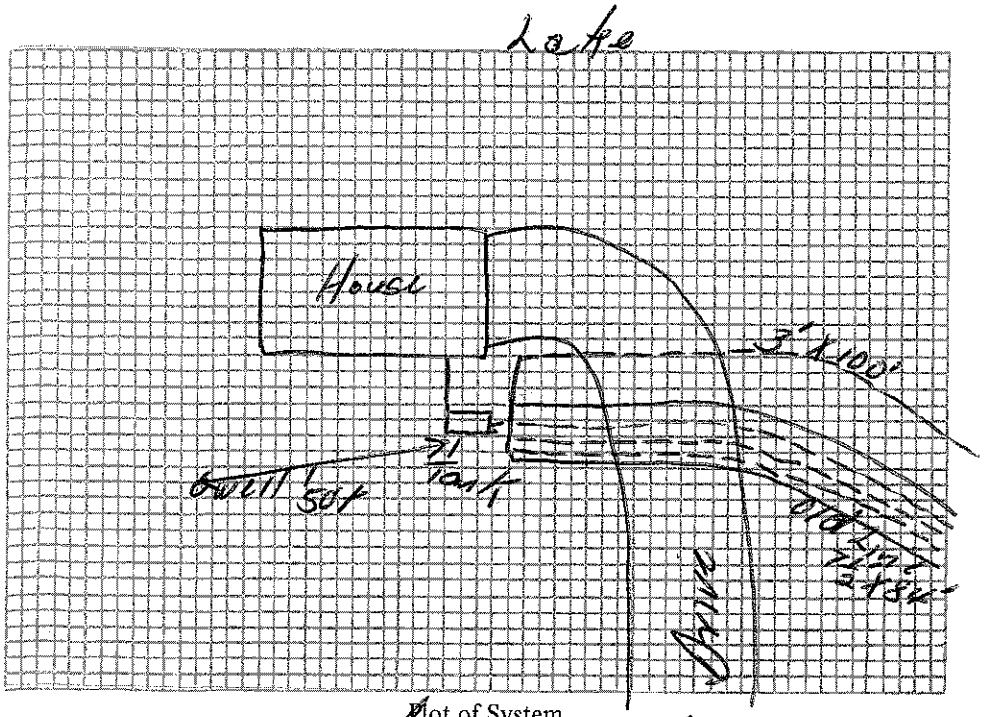
House (✓) Mobile Home ( ) Business ( ) Other _____

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 1 ac

Character & Porosity of Soil Clay loam
Percolation Rate 60 min/in
Topography 25% Slope
Depth to Water Table 10'+
Rock or other impervious formations None



Plot of System

Size of Tank Existing 1000 Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

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