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 Charles A. Gilbert DATE 6-27-22 PERMIT NO. 33

PHONE: Business _____ Home 663 5022

LOCATION 1100 I R on 127 I R on 1238 1 mi on Left S. R. No. _____

SUBDIVISION NAME Late Norman LOT NO. 42 SECTION OR BLOCK NO. 2

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

No. Bedrooms 2 No. Bathrooms 1 Character & Porosity of Soil Existing System

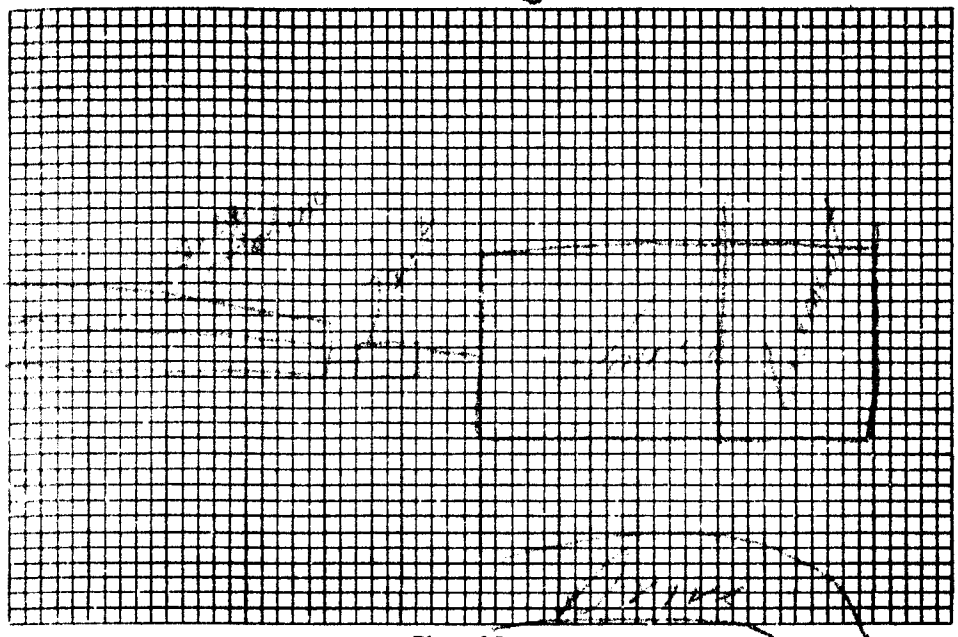
Garbage Disposal Unit Yes (✓) No ( ) Percolation Rate _____

Auto. Dishwasher Yes (✓) No ( ) Topography _____

Auto. Wash. Machine Yes (✓) No ( ) Depth to Water Table _____

Site Suitable Yes (✓) No ( ) Rock or other impervious formations _____

Lot Area 1 acre Adding Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines _____

Sq. Ft. 562½ Linear Ft. 225

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: System working OK at Time of this Inspection Adding Basement

CERTIFICATE OF COMPLETION BY Bob Houston DATE 6-27-22

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