4627210925

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 Dr. Bailey DATE 3-14-24 PERMIT NO. [illegible]

PHONE: Business [illegible] Home [illegible]

LOCATION 1120 TR [illegible] 115 [illegible] Rd to [illegible]
Left 1455 S. Will to SW [illegible] S. R. No. [illegible]

SUBDIVISION NAME [illegible] LOT NO. 308 SECTION OR BLOCK NO. [illegible]

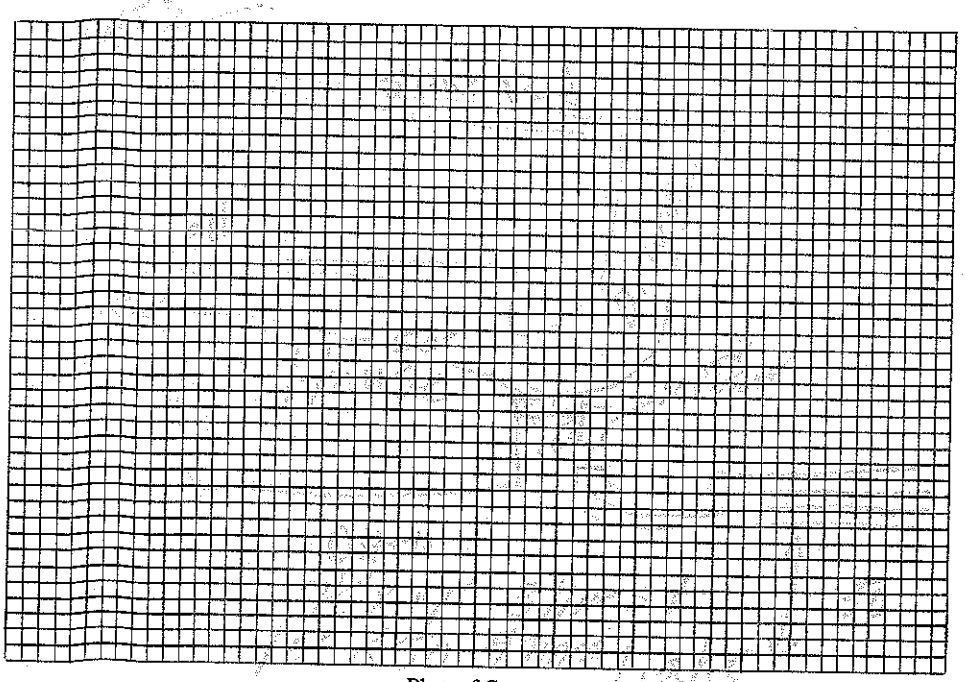
House ( ) Mobile Home ( ) Business ( ) Other [illegible]

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 1 acre

Character & Porosity of Soil [illegible]
Percolation Rate [illegible]
Topography [illegible]
Depth to Water Table [illegible]
Rock or other impervious formations [illegible]



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines [illegible]
Sq. Ft. [illegible] Linear Ft. [illegible]
Depth of Stone in Lines [illegible]
Water Supply: Individual ( )
Public ( )

Installed by [illegible]

IMPROVEMENTS PERMIT BY [illegible]

COMMENTS: [illegible]

CERTIFICATE OF COMPLETION BY [illegible] DATE [illegible]

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