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 John E. Christie DATE 6-12-28 PERMIT NO. 116

PHONE: Business _____ Home _____

LOCATION 1100 TR on 1459 2nd Lot

S. R. No. _____

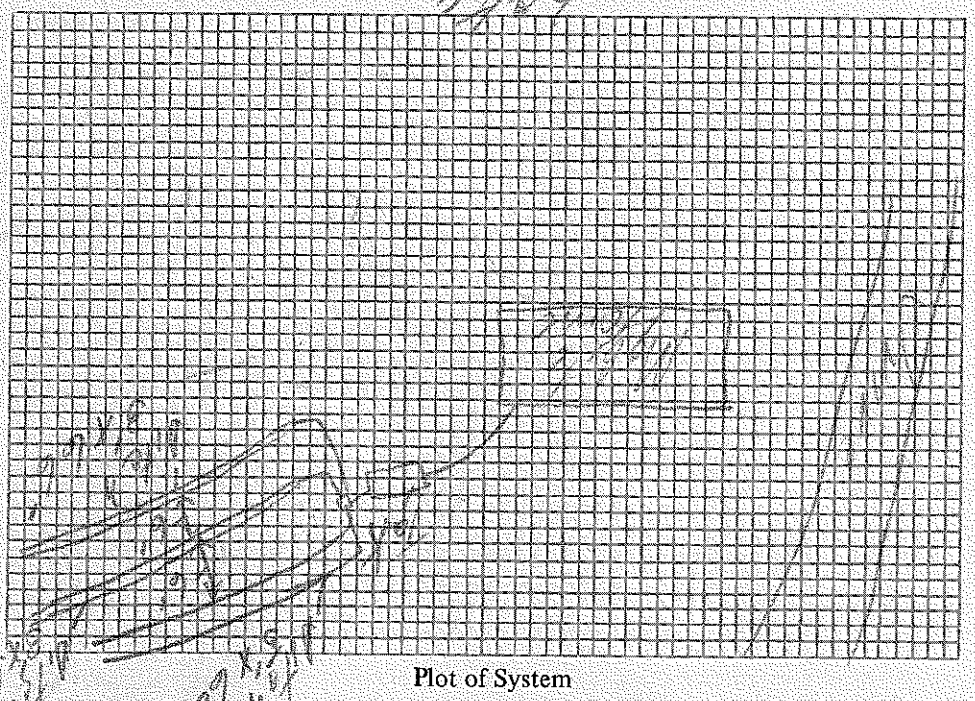
SUBDIVISION NAME L.M. LOT NO. 331 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	60 min per inch	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Good Drop Slope	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10 ft	
			Rock or other impervious formations	Rock on Lot	

Lot Area 3 acre



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 600 Linear Ft. 184
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Wayne Cable

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Peter Truesdale DATE 6-15-28

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