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 Bill Dillard DATE 1-16-79 PERMIT NO. 12

PHONE: Business 536-4801 Home 536 0156

LOCATION 1100 ft on 1178 ft on 1443

S. R. No.

SUBDIVISION NAME L. N. LOT NO. 086 SECTION OR BLOCK NO. 9

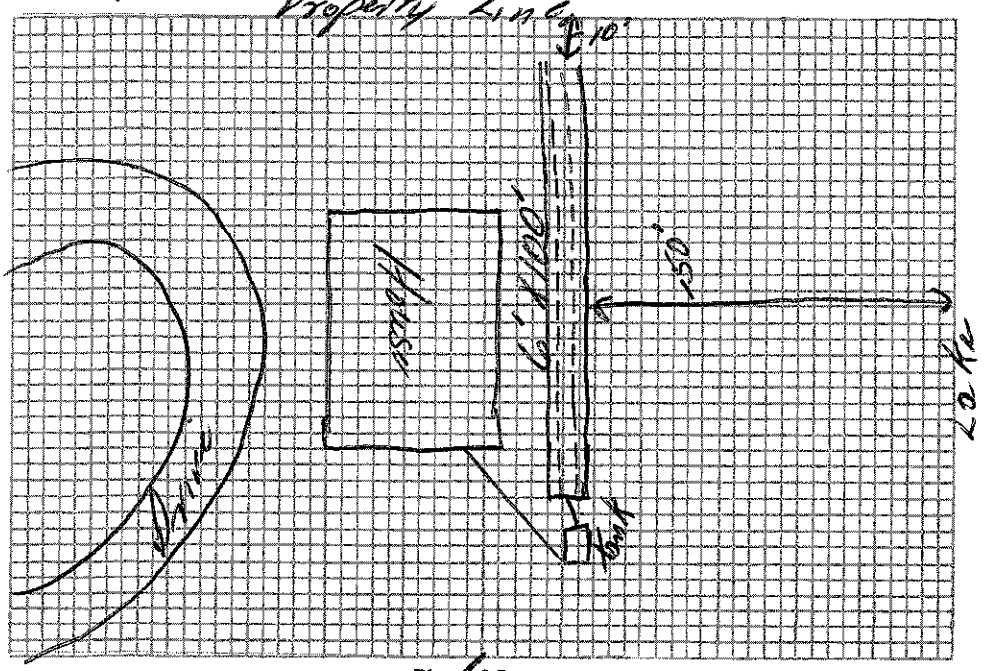
House (✓) Mobile Home ( ) Business ( ) Other

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 3 ac

Character & Porosity of Soil Parent Material
Percolation Rate
Topography 35% slope
Depth to Water Table 10 ft
Rock or other impervious formations Rock On Lot



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )
well next door

Installed by

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Sanitarian to be on Lot when System is to be installed. Lines [redacted] to be inspected before any stone placed in ditch. If rock

CERTIFICATE OF COMPLETION BY DATE

this permit is void. [redacted]

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