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 Jommy Slane DATE 5/16/77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Turn on Perth Rd at Trantman. T.R. on 1321. House on Rt. at end of Rd. Alexander Circle S. R. No. _____

SUBDIVISION NAME Morrison Point LOT NO. 25 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 20.000 sq/ft

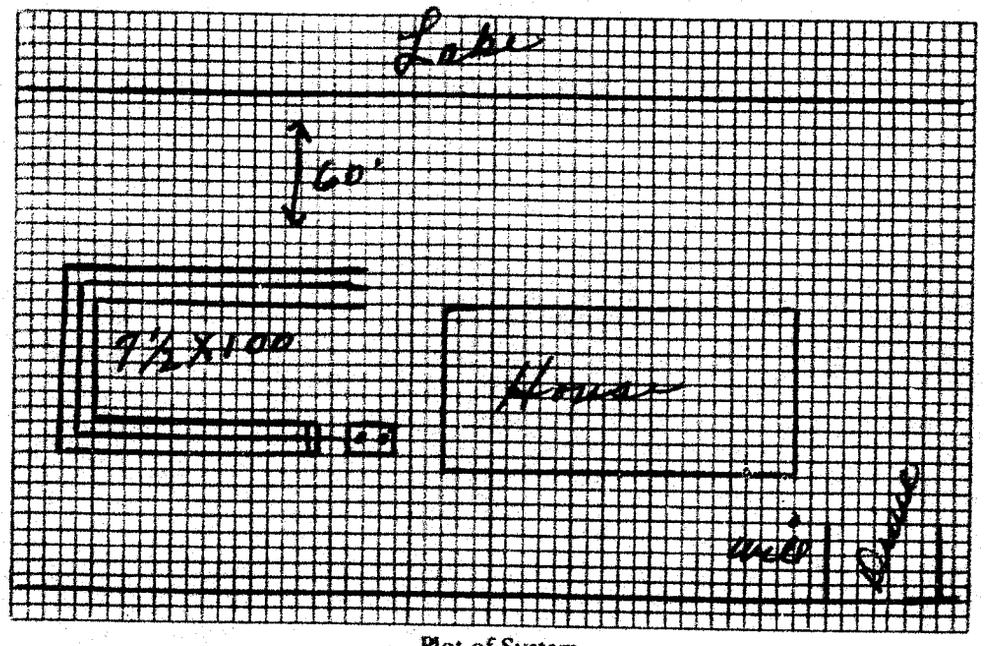
Character & Porosity of Soil Cecil Clay

Percolation Rate _____

Topography Slope to Lake

Depth to Water Table Low

Rock or other impervious formations None



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 750 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Hoke Septic Tank Co.

IMPROVEMENTS PERMIT BY _____

COMMENTS: Well tile put over openings in septic Tanks for Maintenance Purposes. Care should be taken not to damage them when grading yard. Surface water should be diverted away from Tank & lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 5/16/77

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