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 Stafford R. Peebles DATE 9-3-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Turn on E. Mombo Rd. at Troutman, T.L. on 1402 at Bethel Church. House on Lake Near End of Road S. R. No. _____

SUBDIVISION NAME Homestead #2 LOT NO. 13 SECTION OR BLOCK NO. _____

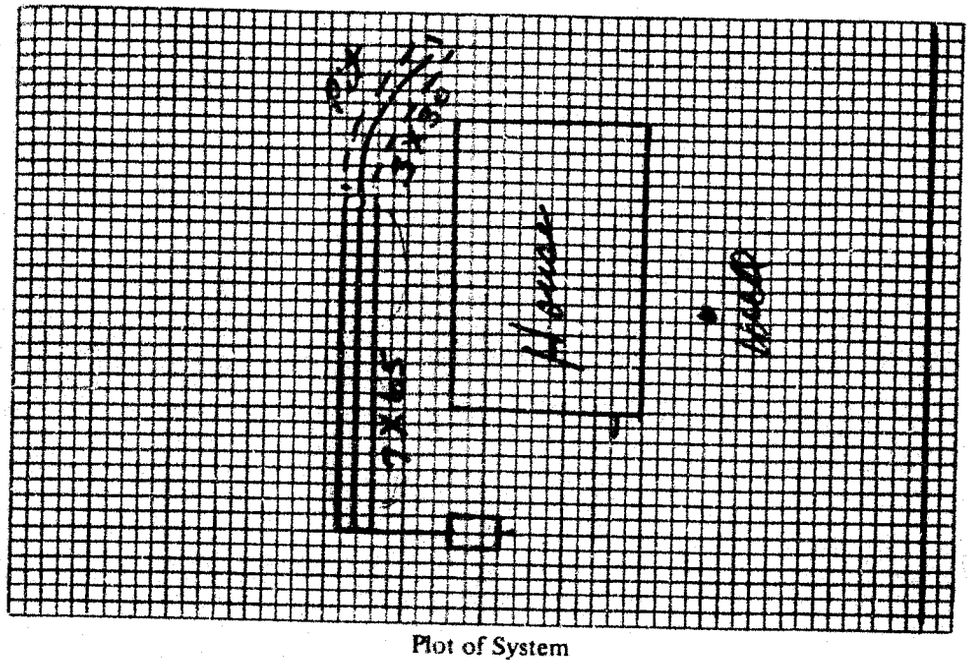
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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 _____



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines as sketched
Sq. Ft. 545 Linear Ft. 225
Depth of Stone in Lines _____
Water Supply: Individual (✓)
Public ( )

Installed by Harlen Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: Subsurface rock bit in ditch. Impossible to put in full size system. Extra stone used (88 Ton) Should work with Normal usage. If trouble should develop later another type sewage system will need to be considered.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 9-3-75

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