00788

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 WESLEY SHERRILL DATE 5-21-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Morrison Farm Rd. off State Park Rd., go all the way down to Allendale Circle on (R). 1/8 mi. on (R). S. R. NO. _____

SUBDIVISION NAME _____ LOT NO. 2 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 Ample

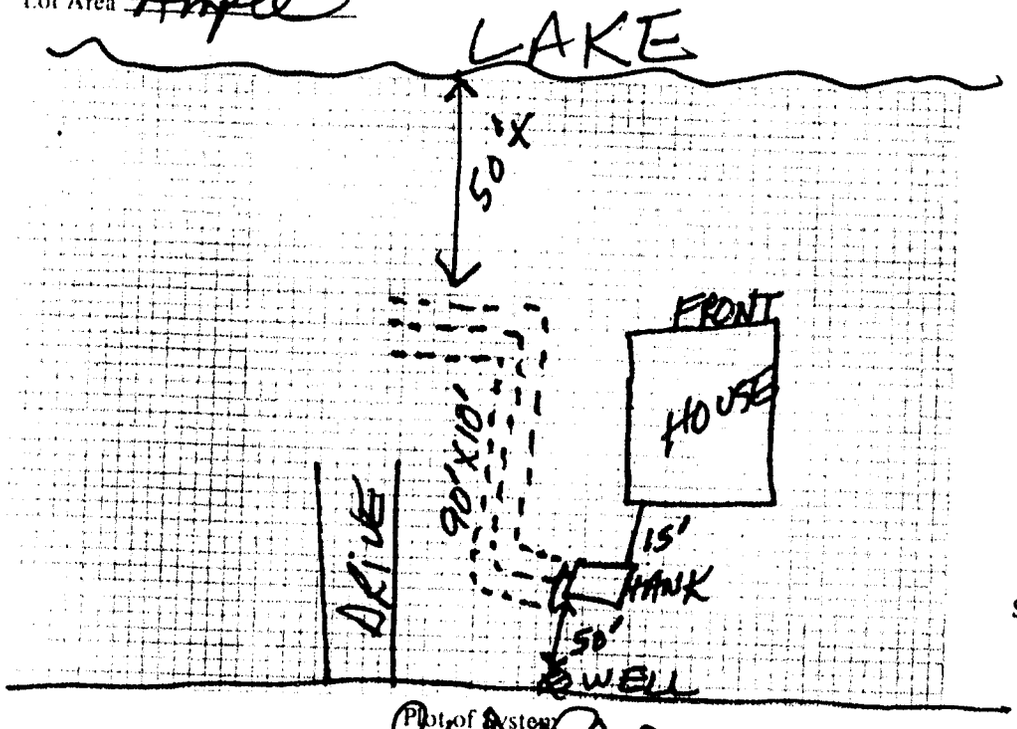
Character & Porosity of Soil Prov. Suitable

Percolation Rate .6 gal/sq. ft.

Topography 6-10% Slope

Depth to Water Table 18"+

Rock or other impervious formations none observed.



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 270

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Dale Lackey

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY Steve Brown

COMMENTS: Crown soil over septic tank on final grading.

CERTIFICATE OF COMPLETION BY Steve Brown DATE 5-21-84.

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold