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 Harry Epps DATE 8-26-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Turn on Poole Rd at Troutman. T.R. on 1321 T.L. on 1415 - House on L. S. R. No. _____

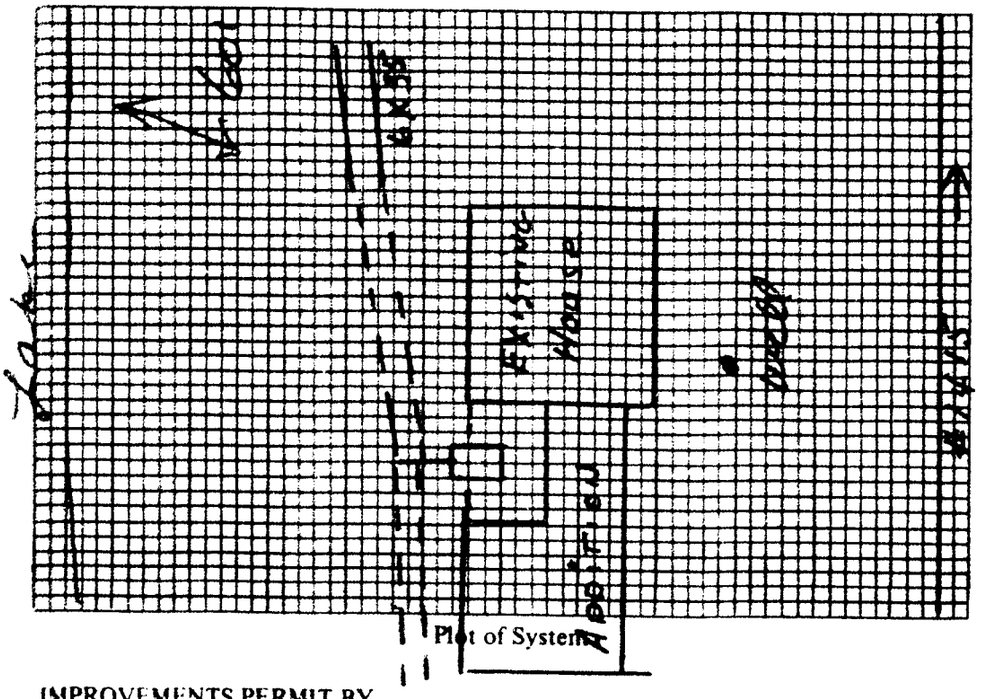
SUBDIVISION NAME _____ LOT NO. 19 SECTION OR BLOCK NO. 17

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	addition to
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	
Auto. Wash. Machine	Yes ( )	No ( )	Topography	Existing Home
Site Suitable	Yes ( )	No ( )	Depth to Water Table	
			Rock or other impervious formations	

Lot Area _____



Size of Tank Existing 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 210 Linear Ft. 70
Depth of Stone in Lines 10"+
Water Supply: Individual (✓)
Public ( )

Installed by John Mercer

Septic Tank Should be Pumped every 3 years

IMPROVEMENTS PERMIT BY _____

COMMENTS: Adding 1 Bathroom and 1 Bedroom. Additional line being added to Present System to Comply With Iredell County Sewage ~~Co~~ regulations

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 8-26-75

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