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 E. T. TROUTMAN DATE 3-7-83 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION State Park Rd. off Forbes Church Rd. - T.L. at 1321 before entering St. Park, go under big power lines, T.L. on left, come to forks - take straight ahead. S. R. No. _____

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

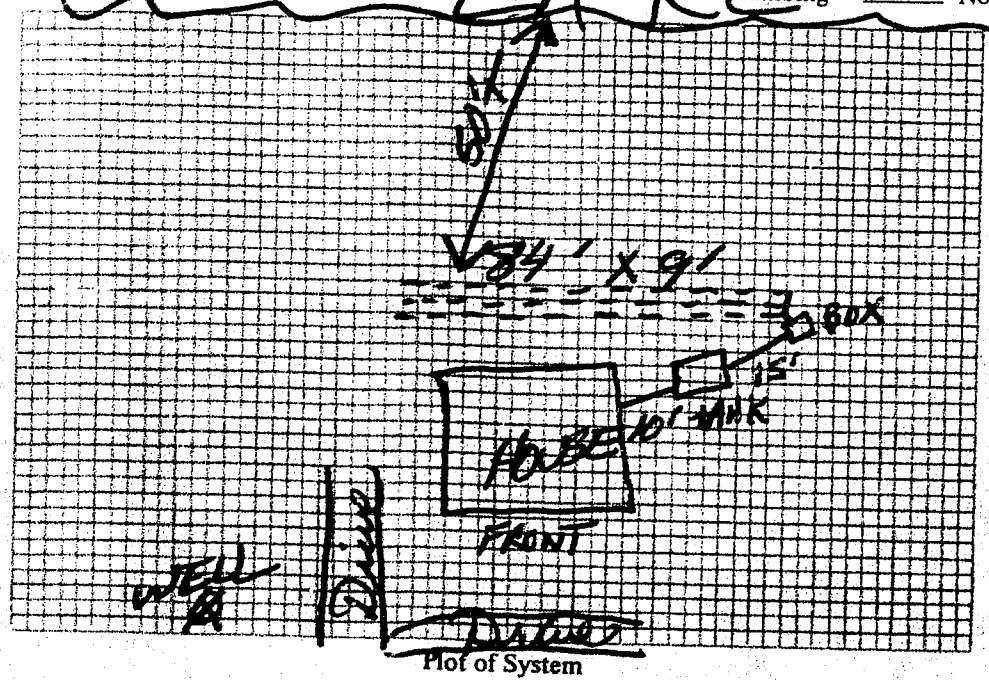
House (✓) Mobile Home ( ) Business ( ) Other Addition of 2 bedrooms + 2 bathrooms

No. Bedrooms 3 No. Bathrooms 3

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

Lot Area Ample

Basement with Plumbing ___ Basement without Plumbing ___ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16"

Water Supply: Individual (✓)
Public ( )

Installed by Robert Hoke

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing septic tank system functioning properly and designed to accomodate addition.

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Steve Brown DATE 3-7-83

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