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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 Joe Turbyfill DATE 1-18-79 PERMIT NO. 19

PHONE: Business _____ Home _____

LOCATION 1100 T2 on 1113

S. R. No. _____

SUBDIVISION NAME Sunside Estates LOT NO. 25 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 ½ ac

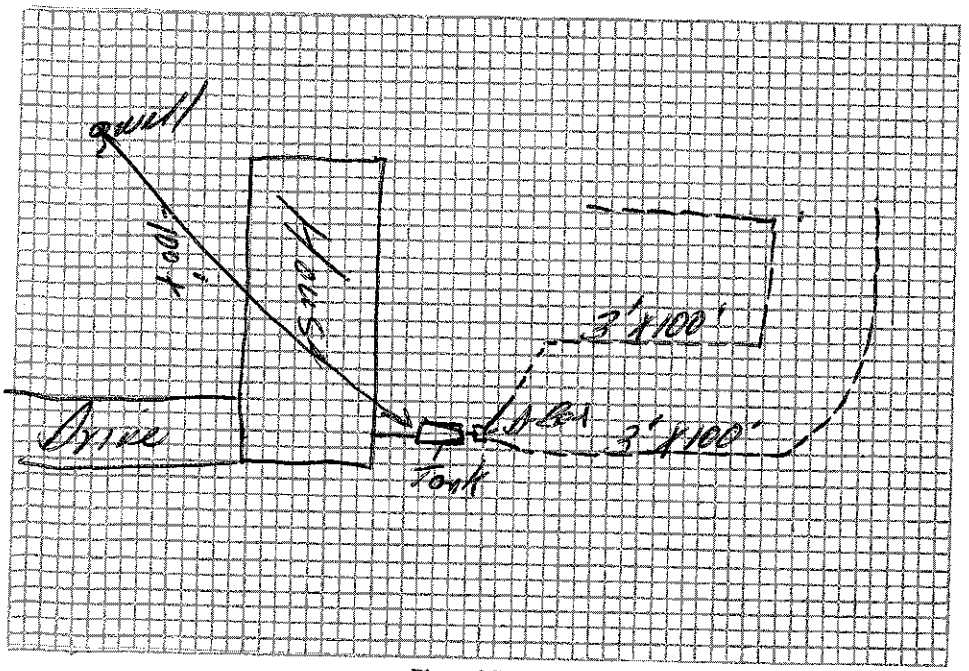
Character & Porosity of Soil Clay loam

Percolation Rate 60 min/in

Topography 2% Slope

Depth to Water Table 10'+

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Wayne Orbison

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John Howell DATE 1-18-79

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