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 Gordon Lowry DATE 7-9-75 PERMIT NO. 147

PHONE: Business _____ Home _____

LOCATION 1109 T Loon 1113 on left towards end of Rd

S. R. No. _____

SUBDIVISION NAME Isle of Pine LOT NO. 26 SECTION OR BLOCK NO. II

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (✓)	
Auto. Dishwasher	Yes (✓)	No ( )	
Auto. Wash. Machine	Yes (✓)	No ( )	
Site Suitable	Yes (✓)	No ( )	

Lot Area ½ acre

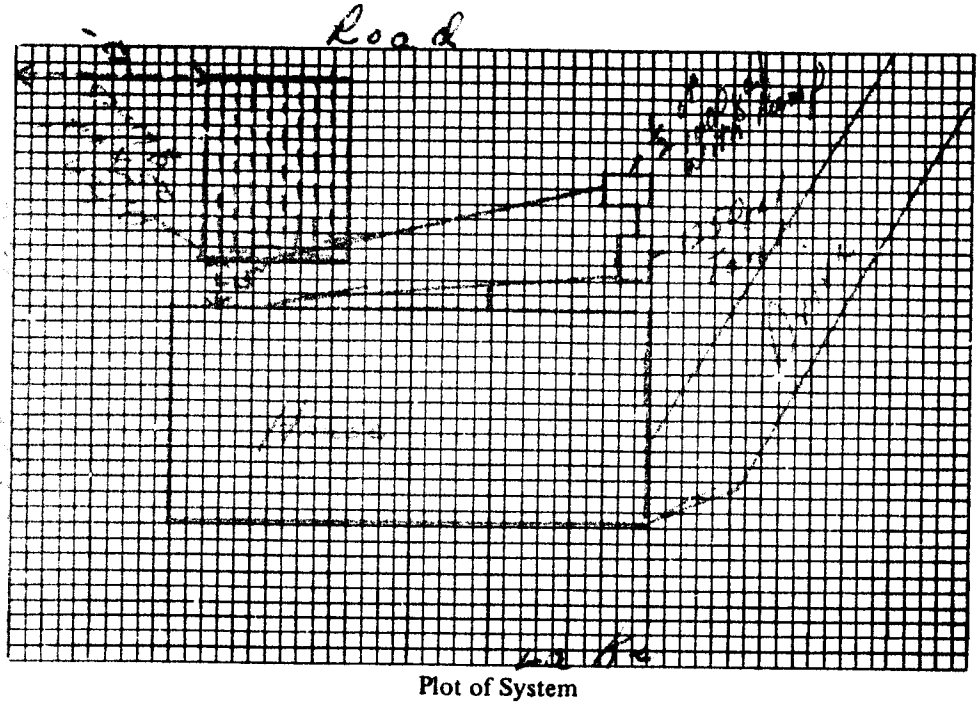
Character & Porosity of Soil Clay loam Porosity Fa.

Percolation Rate 55 mpi

Topography 3 to 5 Slope

Depth to Water Table 4'+3' to Lake Level

Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 8
Sq. Ft. 1100 Linear Ft. 352
Depth of Stone in Lines 15"

Water Supply: Individual (✓)
Public ( )

Installed by F. J. Ervin

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John Houston DATE 7-3-75

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