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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 Stuart Homes DATE 2-13-25 PERMIT NO. 161

PHONE: Business _____ Home _____

LOCATION 115 S Trow Hill Dr

S. R. No. _____

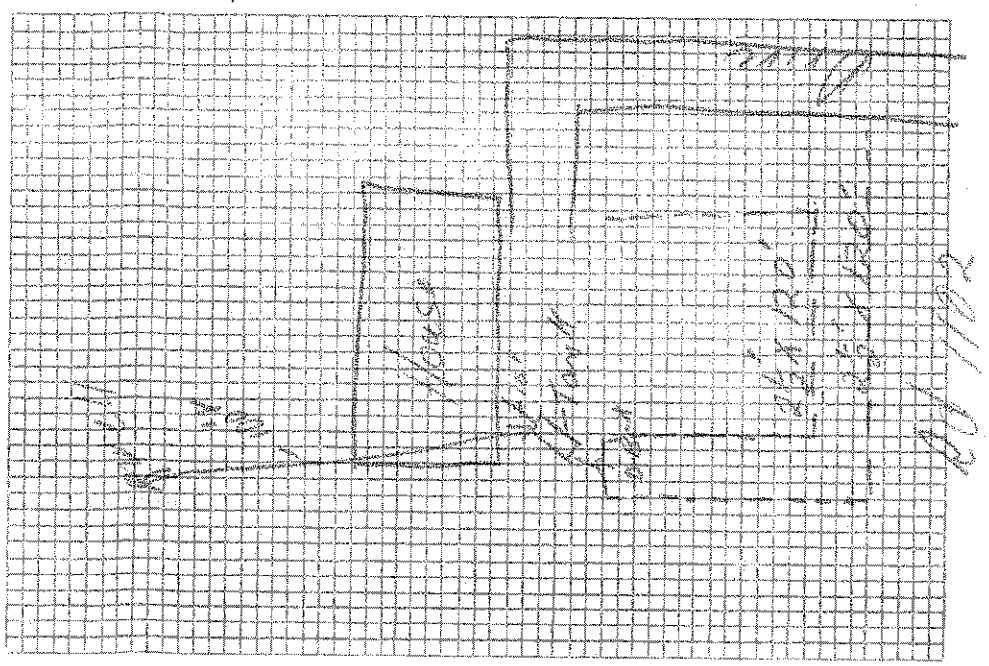
SUBDIVISION NAME Lake View Farms LOT NO. 4 SECTION OR BLOCK NO. 2

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay loam	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	60 min/in	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slight Slope	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6'+	
			Rock or other impervious formations	None	

Lot Area 1/2 acre



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 400 Linear Ft. 240
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Blake Hyde

IMPROVEMENTS PERMIT BY _____

COMMENTS: used 24" pipes so had to go 20' on 2nd line to give 60' sq ft

CERTIFICATE OF COMPLETION BY Blake Hyde DATE 2-13-25

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