# 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 Harold L. Sehell DATE 6-3-74 PERMIT NO. 145

PHONE: Business _____ Home 523-4406

LOCATION 1100 TL on 1112 1mi on right

S. R. No. _____

SUBDIVISION NAME Coveview Park LOT NO. 4 SECTION OR BLOCK NO. _____

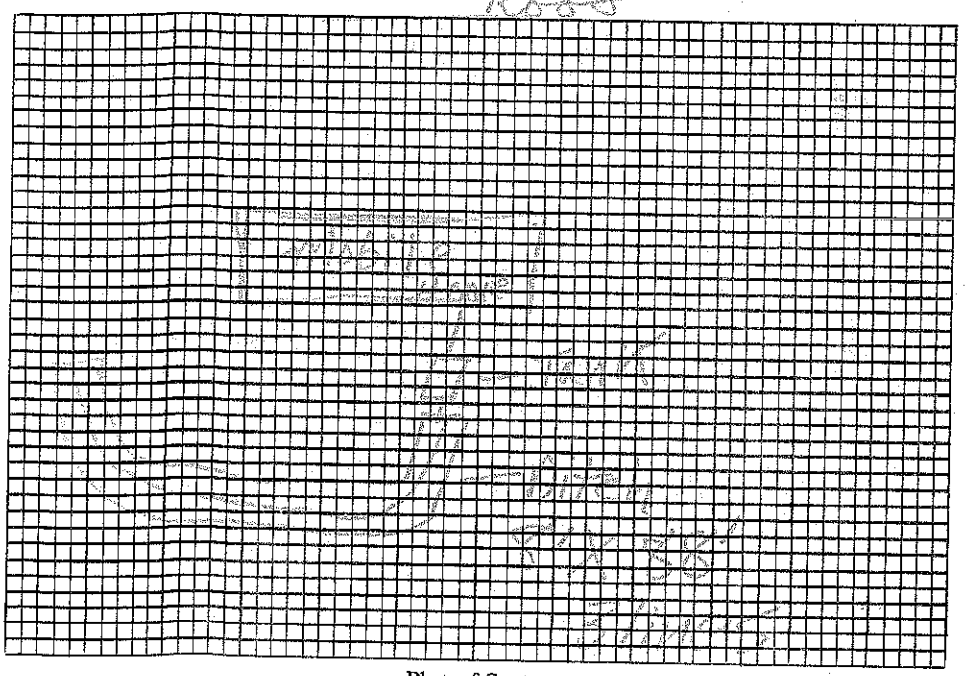
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 16,000 Sq feet

Character & Porosity of Soil Sandy Clay loam
Percolation Rate 30 min / to 1 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 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 18"
Water Supply: Individual ( )
Public (✓)

Installed by E. T. Ervin

IMPROVEMENTS PERMIT BY T. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY T. C. Moore DATE 6-7-74

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