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 Robert T. Campbell DATE 7-13-22 PERMIT NO. 160

PHONE: Business _____ Home 662-5230

LOCATION 1400 Ft Run Rd

S. R. No. _____

SUBDIVISION NAME Cane River Trails Est LOT NO. 9 SECTION OR BLOCK NO. _____

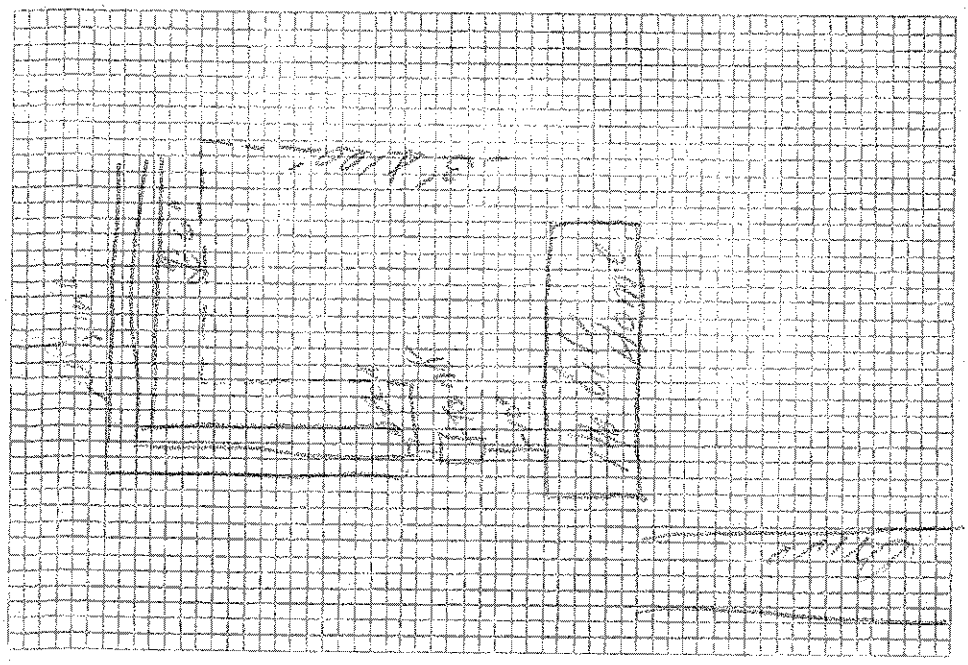
House ( ) Mobile Home (✓) Business ( ) Other _____

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 2 Acres

Character & Porosity of Soil Clay Loam
Percolation Rate Good
Topography Slight Slope
Depth to Water Table 20 Ft
Rock or other impervious formations None



Plot of System

Size of Tank 1 Compartment 1000 Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 420 Linear Ft. 420
Depth of Stone in Lines 24"
Water Supply: Individual ( )
Public (✓)

Installed by J. C. Lewis

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Robert T. Campbell DATE 7-19-22

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