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 H E Dickson DATE 9 Aug 76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Turn on Pond Ch. Rd in Statesville - T.R on Rd #1321 - T.L. on Rd #1447 - T.L. on 1448 - House on Right at curve.

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. 20 SECTION OR BLOCK NO. 18

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

No. Bedrooms 1 No. Bathrooms 1

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

Lot Area 20,000 sq ft.

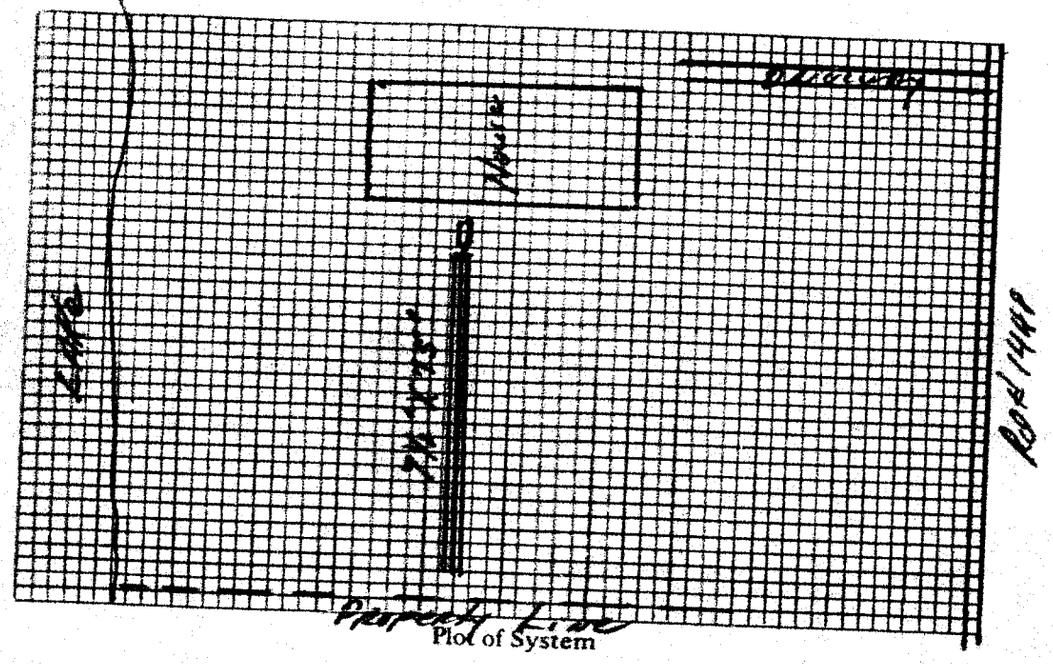
Character & Porosity of Soil Suitable

Percolation Rate 90

Topography Slope to lake

Depth to Water Table unk

Rock or other impervious formations unk



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 562 Linear Ft. 225

Depth of Stone in Lines 14"

Water Supply: Individual (✓)

Public ( )

not shown

Installed by Sam Oneal

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Will Steward DATE 9 Aug 76

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