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 Richard M. Holbert DATE 9-3-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Perth Rd at Troutman - T.R. on 1321 - T.L. on 1447 T.L. 1st Rd. T.L. at Town of Rd 1st Lot on L S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 35 SECTION OR BLOCK NO. 18

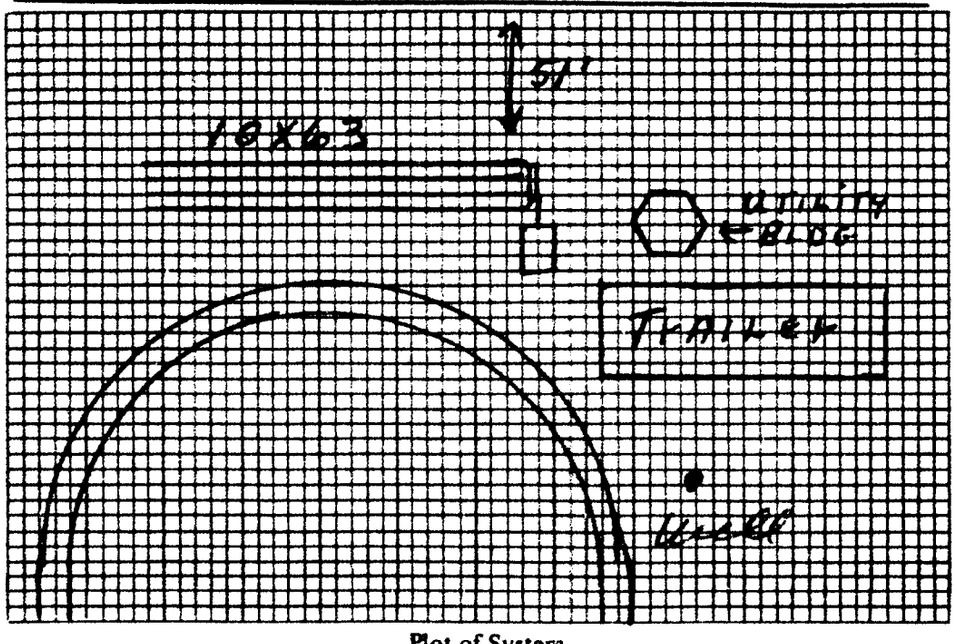
House ( ) Mobile Home (✓) Business ( ) Other _____

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 20,000 sq ft.

Character & Porosity of Soil Coosa Clay
Percolation Rate _____
Topography Slope To Lake
Depth to Water Table Low
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Raymond Adams

IMPROVEMENTS PERMIT BY _____

COMMENTS: Divert surface water away from Tank & Lines

CERTIFICATE OF COMPLETION BY E. G. Stutenson DATE 9-3-75

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