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 Lester Stowe DATE 5-31-79 PERMIT NO. 180

PHONE: Business _____ Home _____

LOCATION 1303 N TL on 1300 TR on 1432 ~.6mi on Rt

S. R. No. _____

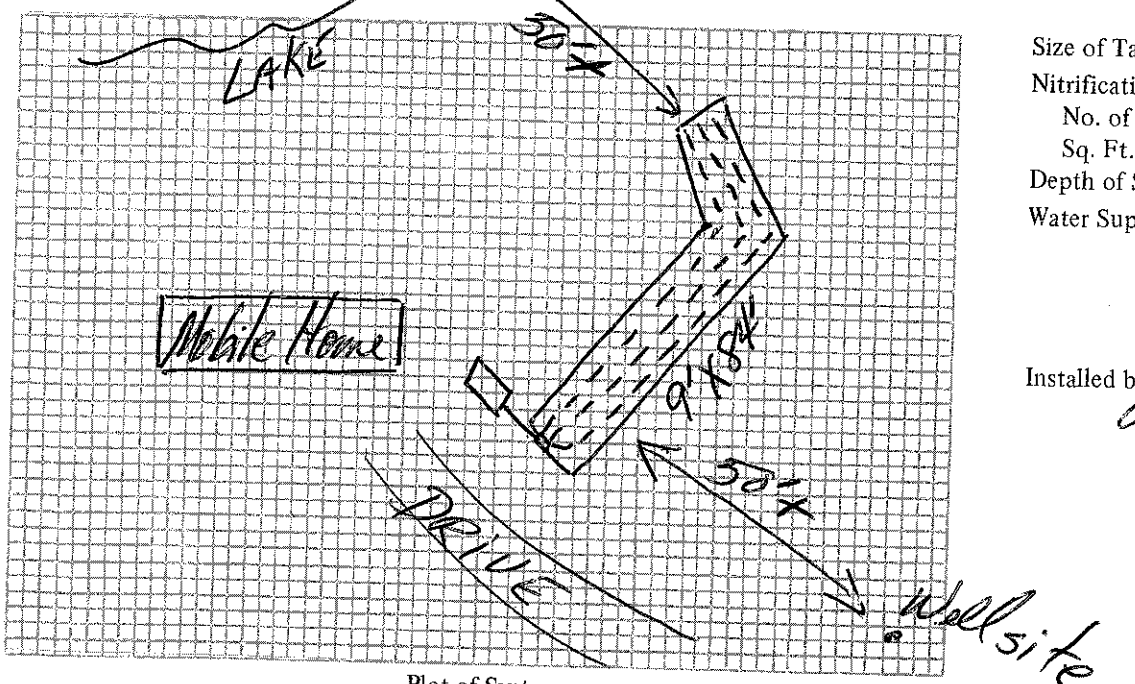
SUBDIVISION NAME L.N. LOT NO. 39 SECTION OR BLOCK NO. 16

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 ~3/4 AC.

Character & Porosity of Soil clay loam
Percolation Rate 30 min/ft
Topography Gently
Depth to Water Table sink.
Rock or other impervious formations none obs.



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16" ft
Water Supply: Individual (✓)
Public ( )

Installed by JC's Backhoe Service

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Hinson DATE 5-31-79

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