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# 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 Smith Builders DATE 6-21-22 PERMIT NO. 1523

PHONE: Business _____ Home _____

LOCATION 109 Tr 90 to 490

S. R. No. _____

SUBDIVISION NAME Idlewood Farms LOT NO. 42 SECTION OR BLOCK NO. _____

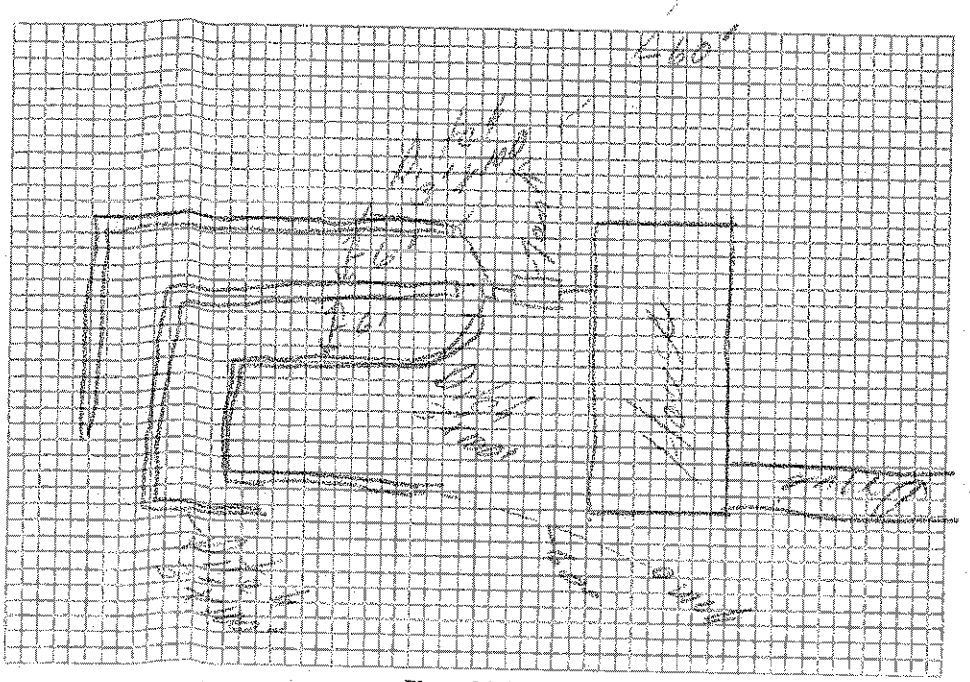
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 2

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

Lot Area 1 acre

Character & Porosity of Soil Clay loam
Percolation Rate 6 min/inch
Topography 2-8% slope
Depth to Water Table 6 ft
Rock or other impervious formations None




Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 200 Linear Ft. 300
Depth of Stone in Lines 24
Water Supply: Individual (✓)
Public ( )

Installed by T.P. Sowers

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Justin Shaughnessy DATE 6-30-22

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