IREDELL COUNTY HEALTH DEPARTMENT 4646394329

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Hope Bros DATE July 5, 78 PERMIT NO. 1462

PHONE: Business _____ Home 873-4411

LOCATION [illegible] on 1107 [illegible] on 1190

S. R. No. _____

SUBDIVISION NAME [illegible] LOT NO. 44-45 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 _____

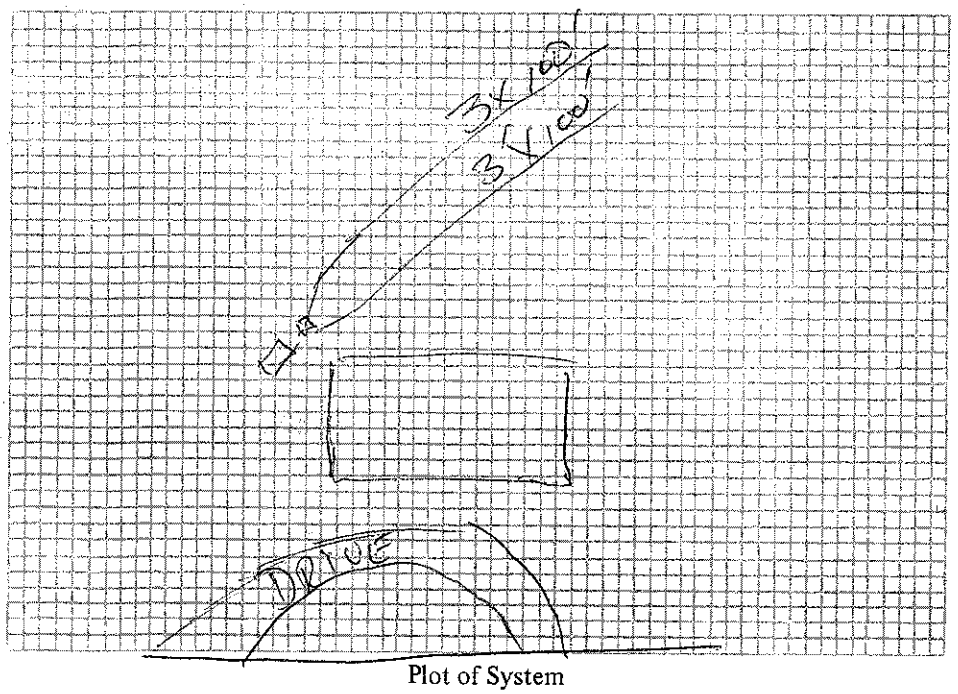
Character & Porosity of Soil Clay Loam

Percolation Rate _____

Topography _____

Depth to Water Table [illegible]

Rock or other impervious formations [illegible]



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 300 Linear Ft. 200

Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by Hope Bros
Arnie Duncan

IMPROVEMENTS PERMIT BY [illegible]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [illegible] DATE July 15, 78

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