4655 28 0100

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 Don R. Teal DATE 2-2-79 PERMIT NO. 52-

PHONE: Business _____ Home _____

LOCATION 155 I 2 on 1136 1st Left 3rd house on right

S. R. No. _____

SUBDIVISION NAME Fremont Park LOT NO. _____ SECTION OR BLOCK NO. _____

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

Repair

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 ½ acre

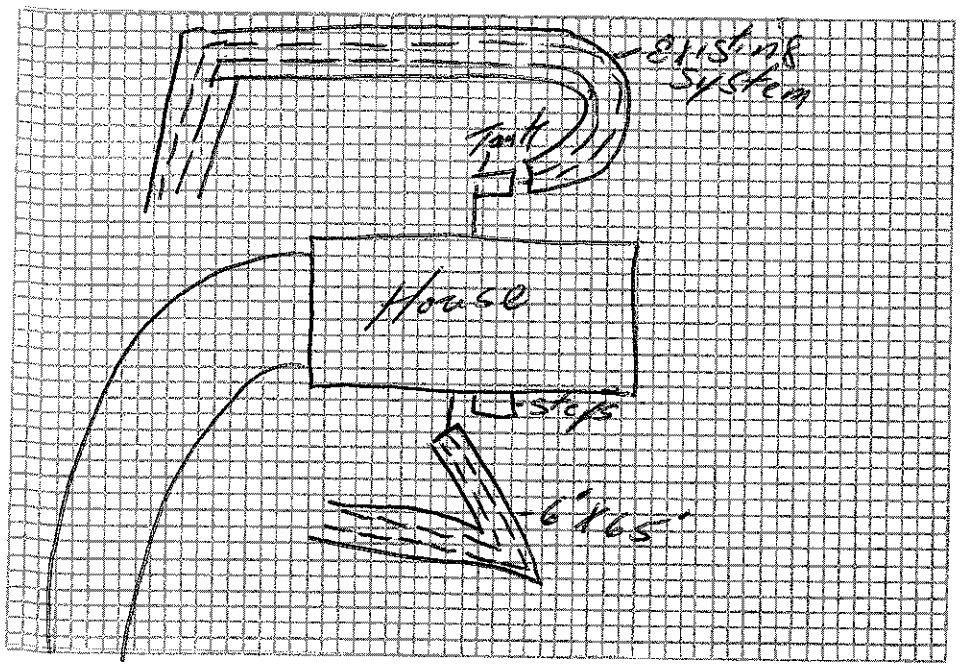
Character & Porosity of Soil Clay loam

Percolation Rate 60 mins/in

Topography 12% slope

Depth to Water Table 10'+

Rock or other impervious formations None



Plot of System

Size of Tank _____ Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 375 Linear Ft. 130'

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by F.J. Ervin

IMPROVEMENTS PERMIT BY _____

COMMENTS: Put Line in for Washing Machine + Bath Tub.

CERTIFICATE OF COMPLETION BY John Houston DATE 2-2-79

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