4658-85-8076

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 D. S. McNeely DATE 3-24-77 PERMIT NO. 44

PHONE: Business _____ Home _____

LOCATION 21 N 3rd Ave W Cliff

S. R. No. _____

SUBDIVISION NAME Collins Park LOT NO. 3 SECTION OR BLOCK NO. 2

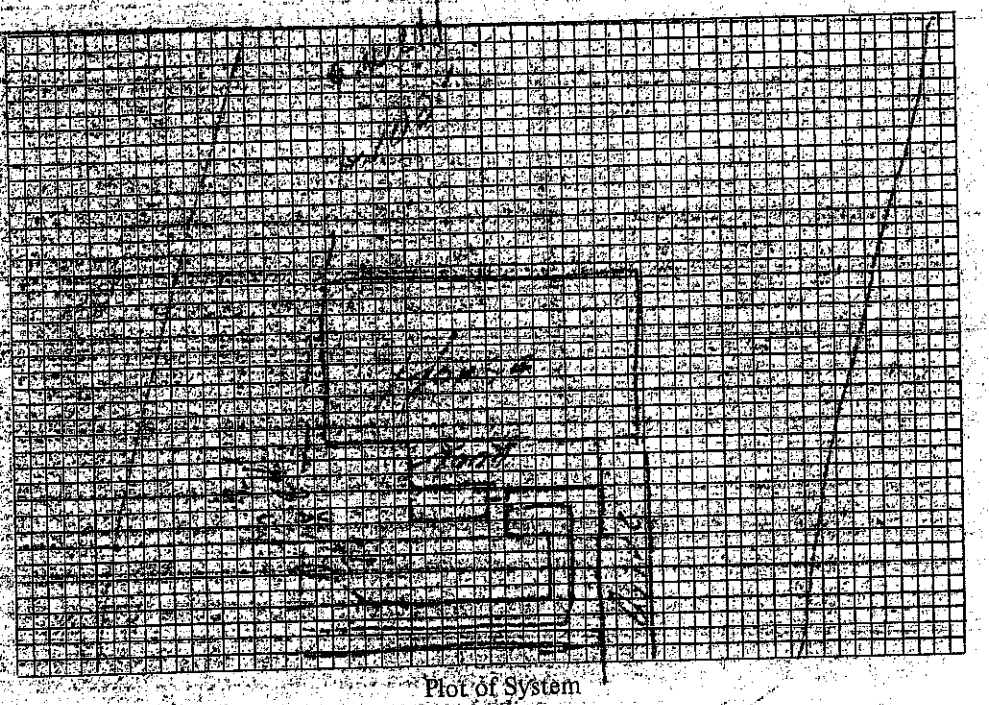
House (✓) Mobile Home ( ) Business ( ) Other _____

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 1/2 acre

Character & Porosity of Soil Clay loam Loose
Percolation Rate Soil Found
Topography 2 2% Slope
Depth to Water Table 10 ft
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Bill Lowery

IMPROVEMENTS PERMIT BY Peter Sanders

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Peter Sanders DATE 3-24-77

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