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 Ray Smith DATE 8-24-12 PERMIT NO. _____

PHONE: Business _____ Home 528-1123

LOCATION 211 Tyson Rd Troutman NC

S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 1.5

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

Lot Area 20,000

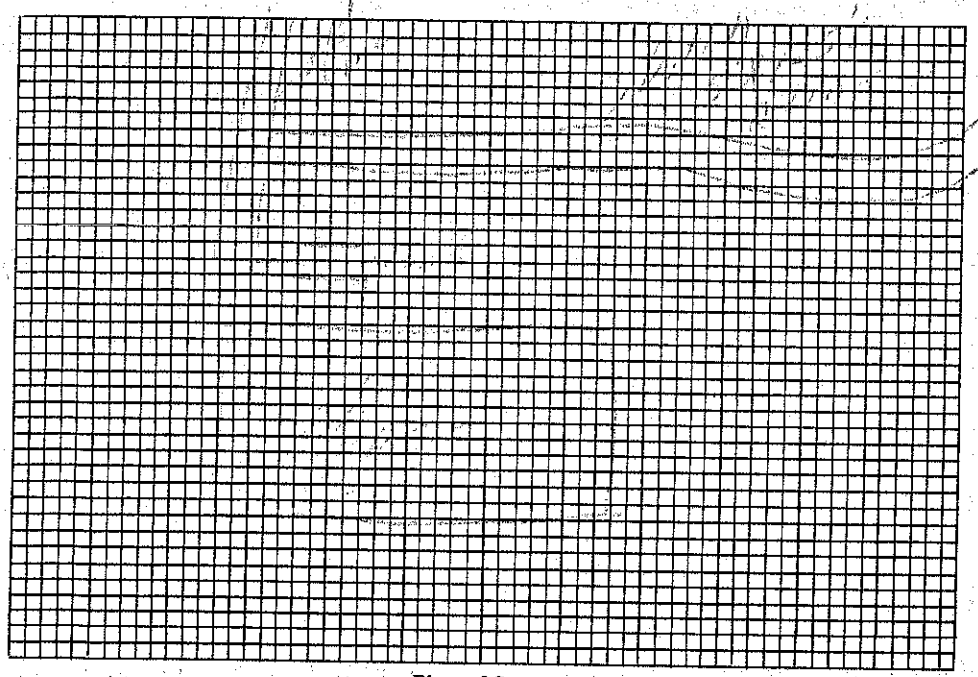
Character & Porosity of Soil Red Clay

Percolation Rate _____

Topography _____

Depth to Water Table _____

Rock or other impervious formations _____



Plot of System

Size of Tank 750 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 250 Linear Ft. 350
Depth of Stone in Lines 12

Water Supply: Individual (✓)
Public ( )

Installed by Sam Clinard

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Need To cut Hill Trees
Like Dirty

CERTIFICATE OF COMPLETION BY John Houston DATE 9-28-12

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