IREDELL COUNTY HEALTH DEPARTMENT 4659-72-6228

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

OWNER OR CONTRACTOR Danny Hepler DATE 6-1-83 PERMIT NO. 179

PHONE: Business _____ Home _____

LOCATION 115N off R 2389 TR 1st Street 1st house on R (Split level)

S. R. No. _____

SUBDIVISION NAME Roseland Heights LOT NO. 7 SECTION OR BLOCK NO. _____

House (X) Mobile Home ( ) Business ( ) Other Adding to Existing Util BR and Utility Room

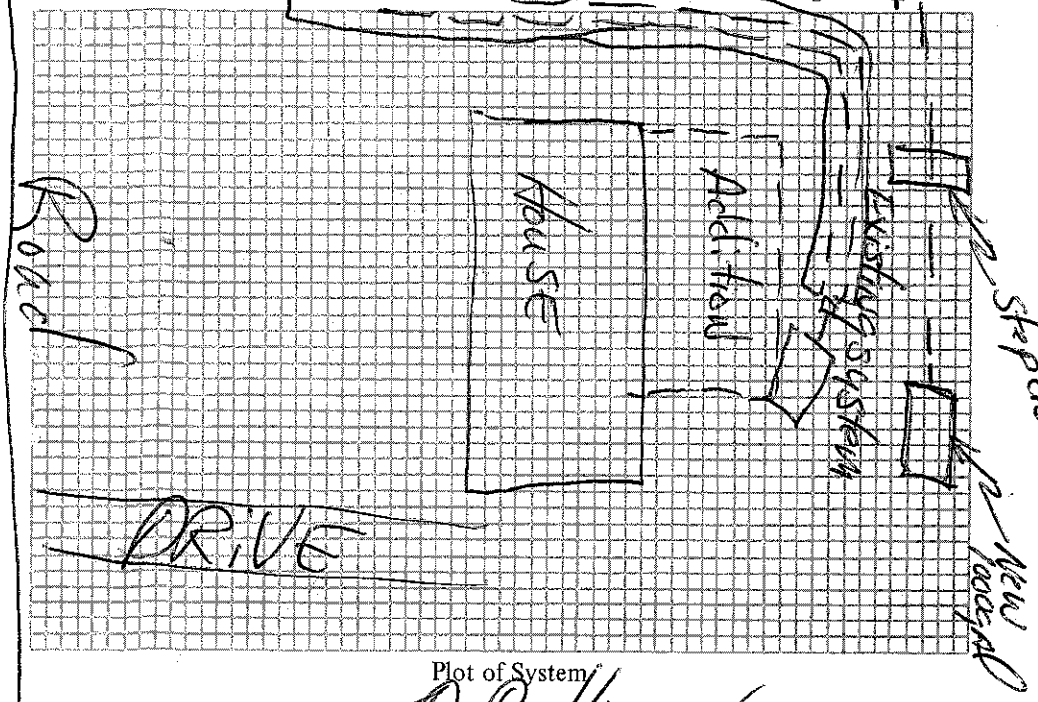
No. Bedrooms 4 No. Bathrooms 2-3

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

Character & Porosity of Soil _____
Percolation Rate _____
Topography Existing System
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area Existing Lot Size 110' 125'x31'

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 1
Sq. Ft. 375 Linear Ft. 125
Depth of Stone in Lines 12"

Water Supply: Individual ( )
Public X

Installed by Wayne Orbison

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY D. R. Hinson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 6-1-83

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold