4059-72-7278

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 James Osborne DATE 6-27-79 PERMIT NO. 220

PHONE: Business _____ Home _____

LOCATION 21 N TR on 2389 TR on 2483 1st house on Rt.

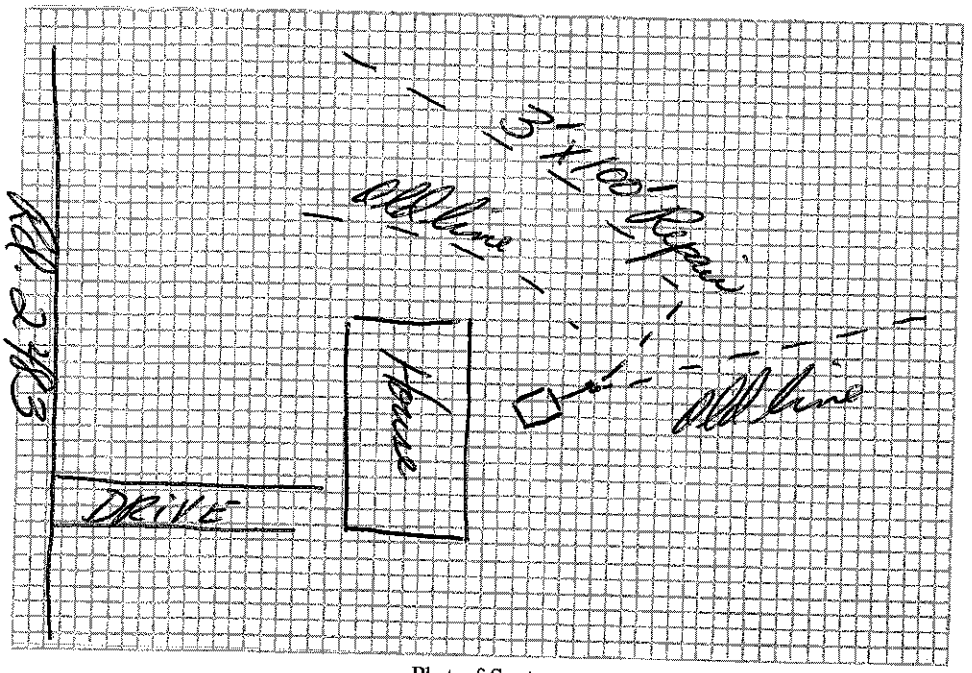
SUBDIVISION NAME Roseland Heights LOT NO. [redacted] SECTION OR BLOCK NO. _____ S. R. No. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay loam
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	80 mpi
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	4-6%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	sink.
			Rock or other impervious formations	none obs.

Lot Area 1 AC.



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 10"+
Water Supply: Individual ( )
Public (✓)
Community Well
Installed by Wayne Orbison

IMPROVEMENTS PERMIT BY David R. Hinson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY David R. Hinson DATE 6-27-79

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