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 Frank Cook DATE 5-6-22 PERMIT NO. 95

PHONE: Business _____ Home _____

LOCATION 1502 Fox Hopping Rd

S. R. No. _____

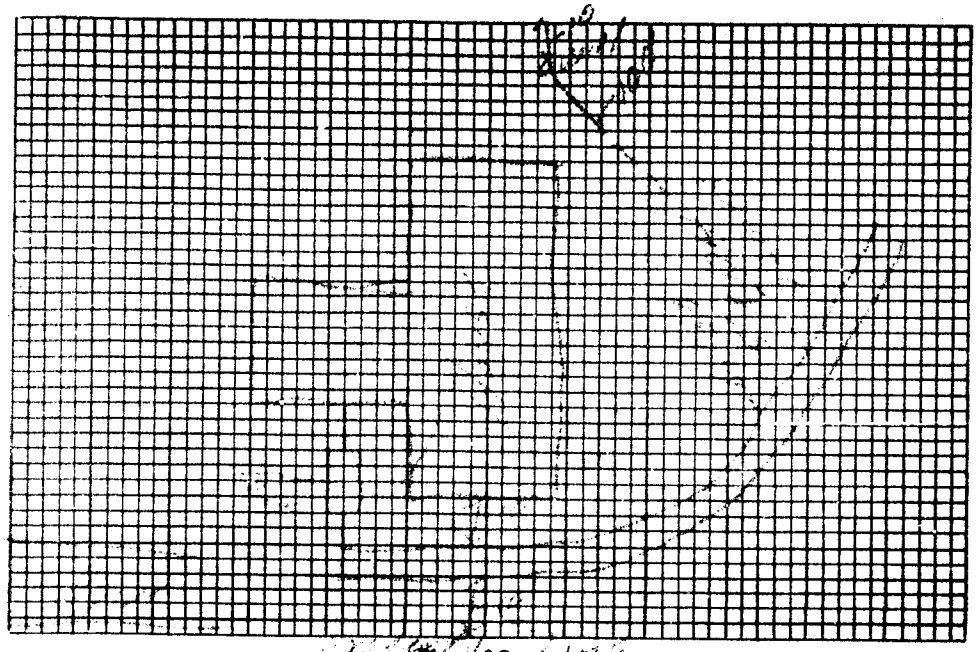
SUBDIVISION NAME Woodland Heights LOT NO. 11 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Sandy Clay Loam Ped
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	21 Bpm
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-8% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	42"
			Rock or other impervious formations	None

Lot Area 1 acre +



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250'
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Wayne Dixon

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 5-6-22

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