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 Millers Auto Clinic DATE 7-2-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 64-70 W. Past White Oak. Garage on Rt at Lake S. R. No. _____

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

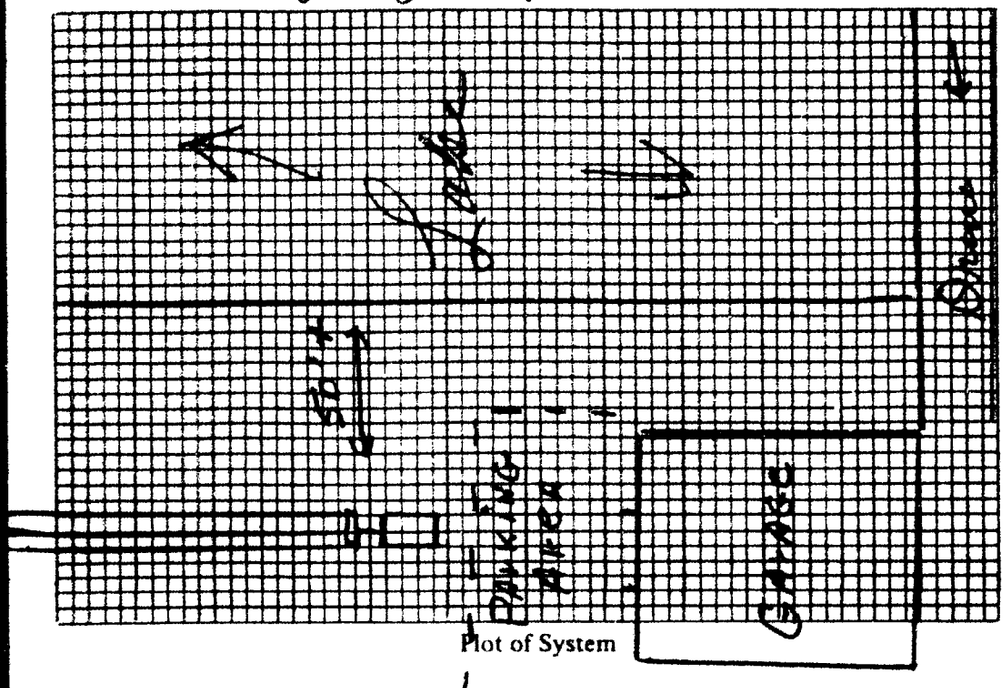
House ( ) Mobile Home ( ) Business ( ) Other Garage

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Red Clay
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	[illegible]
Auto. Wash. Machine	Yes ( )	No ( )	Topography	Slope to Lake
Site Suitable	Yes ( )	No ( )	Depth to Water Table	Low
			Rock or other impervious formations	None

Lot Area

Hickory Highway →



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 John Mercer

IMPROVEMENTS PERMIT BY _____

COMMENTS: Bathroom added to existing Bldg.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 7-2-75

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