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 Johnny Shook DATE 8-25-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Just Island Ford Rd Past Bradford X Rd. TR in driveway at Creek S. R. No. _____

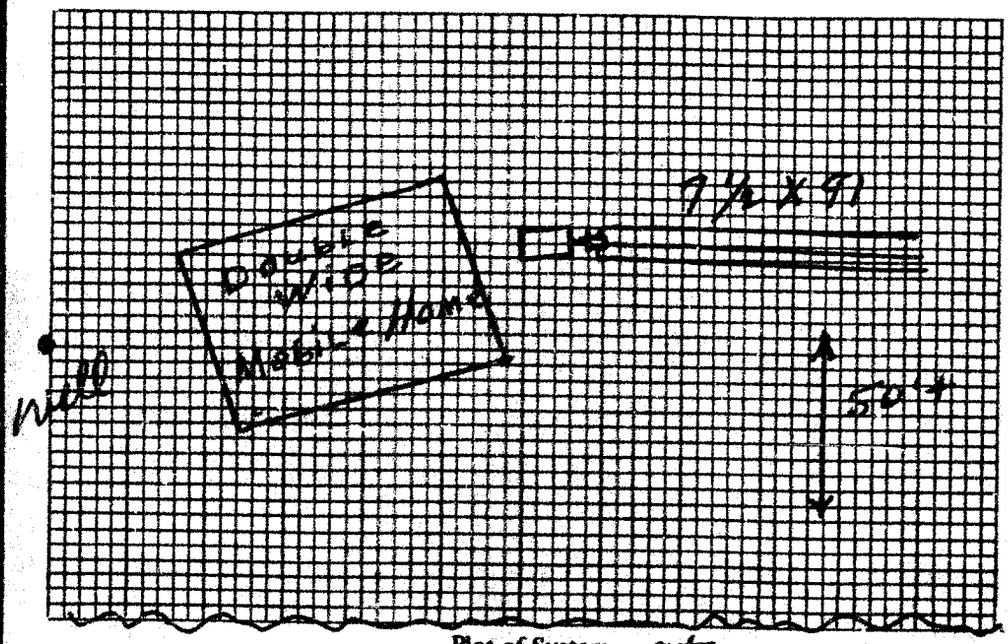
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area Acreage



Plot of System Stream

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 682 Linear Ft. 273
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Henry Sigmon

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 8-25-75

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

Island Ford Rd.