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 Gene Alexander DATE 2-28-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION N.C. 115 South to L on 1138 cross Th Trailer at entos Drive S. R. No. 1138

SUBDIVISION NAME Alexander Farm LOT NO. 2 SECTION OR BLOCK NO. _____

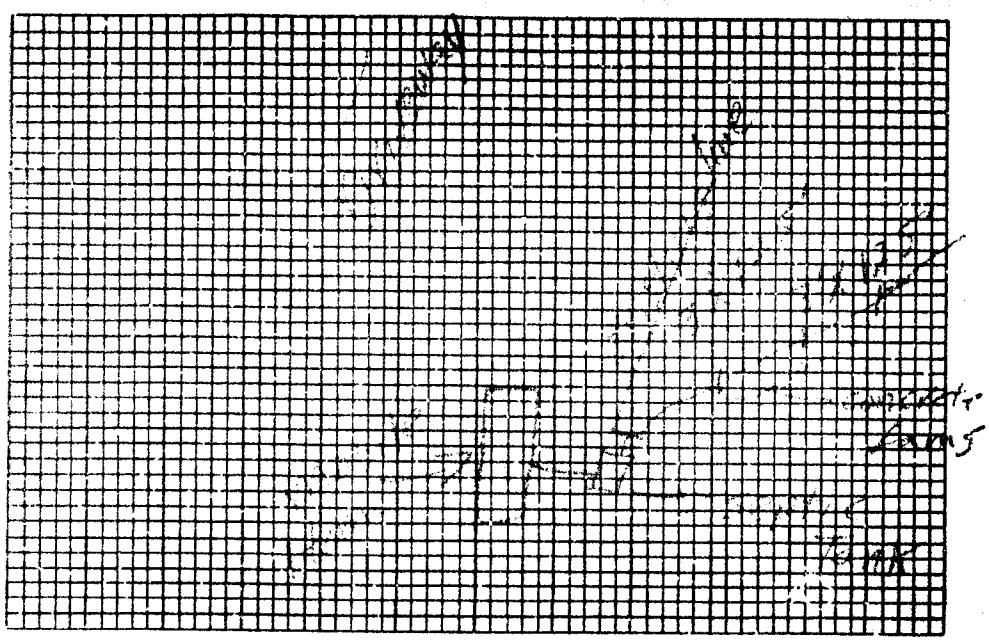
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

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

Character & Porosity of Soil Clay loam (Porosity not taken)
Percolation Rate _____
Topography 3% Slope
Depth to Water Table 10'+
Rock or other impervious formations None

Lot Area 2 Acres



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )
well next door

Installed by self installed

IMPROVEMENTS PERMIT BY _____

COMMENTS: lower Ditch had too much fall used 3 Concrete dams to retard flow

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 2-28-74

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