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 Bobby Lee DATE 4-4-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 To Old Mountain Rd. T.L. - T.R. on Beaver Dam Rd #1510 - House on L approx ¼ mile S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1 Acre

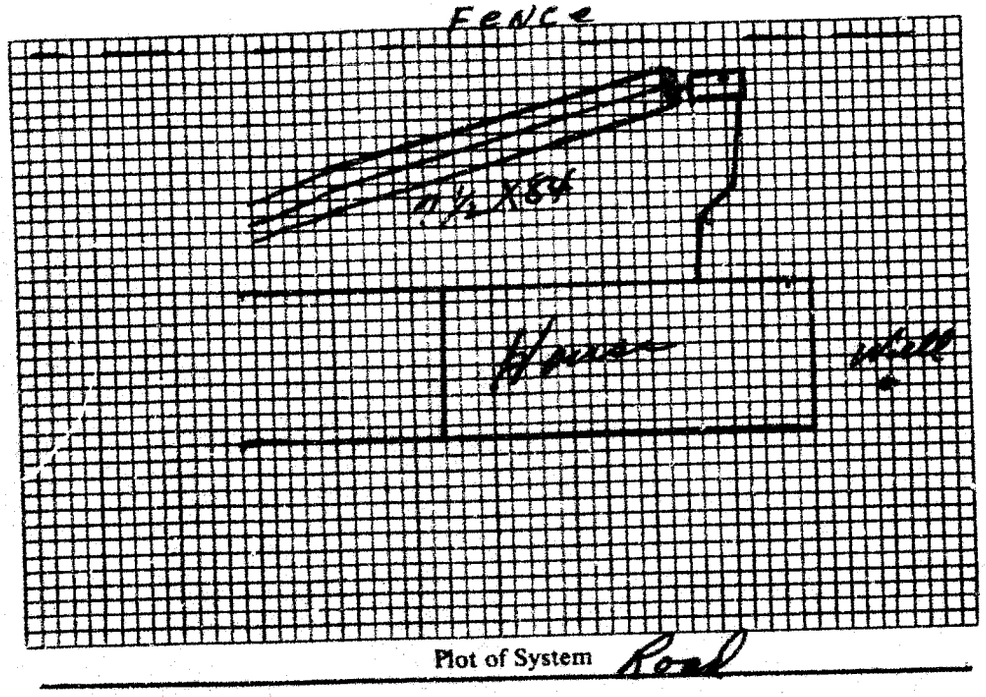
Character & Porosity of Soil Hard Red Clay

Percolation Rate _____

Topography Slope

Depth to Water Table Low

Rock or other impervious formations None



Plot of System Road

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 Raymond Adams

IMPROVEMENTS PERMIT BY _____

COMMENTS: Original Layout Changed at Homeowners request. Lines are approx. 6' dwpat start of ditch.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 4-4-75

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