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 Ralph G & H.C. Yount DATE 9/1/76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40W, T.R on Old NT Rd, on left about 900 yd

S. R. No. _____

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

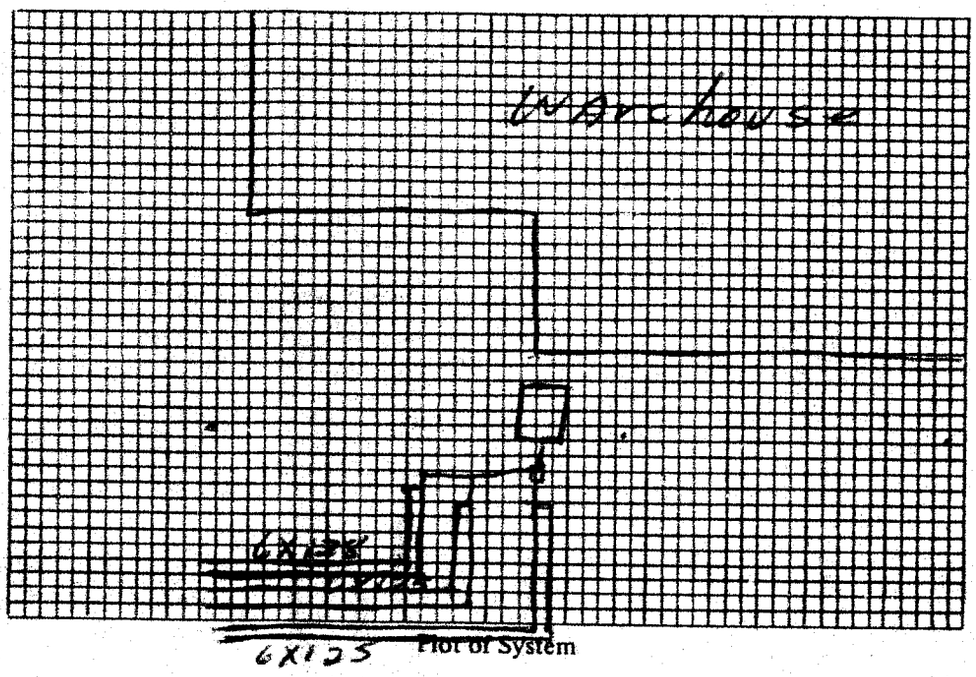
House ( ) Mobile Home ( ) Business ( ) Other Warehouse & Furniture Showroom

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area 6 acres

Character & Porosity of Soil _____
Percolation Rate _____
Topography _____
Depth to Water Table _____
Rock or other impervious formations _____



Plot of System

✓

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 6
Sq. Ft 2250+ Linear Ft. 750
Depth of Stone in Lines 18"+
Water Supply: Individual ( )
Public (✓)

Installed by Harlee Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [illegible] & Andrew E. Causey DATE 9/1/76

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