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 Gladys Bruce DATE 9-8-76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION I-40 W To Old Mountain Rd. T.R. - T.R. 1st Road into Ponderosa Acres. Last House on L S. R. No. _____

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

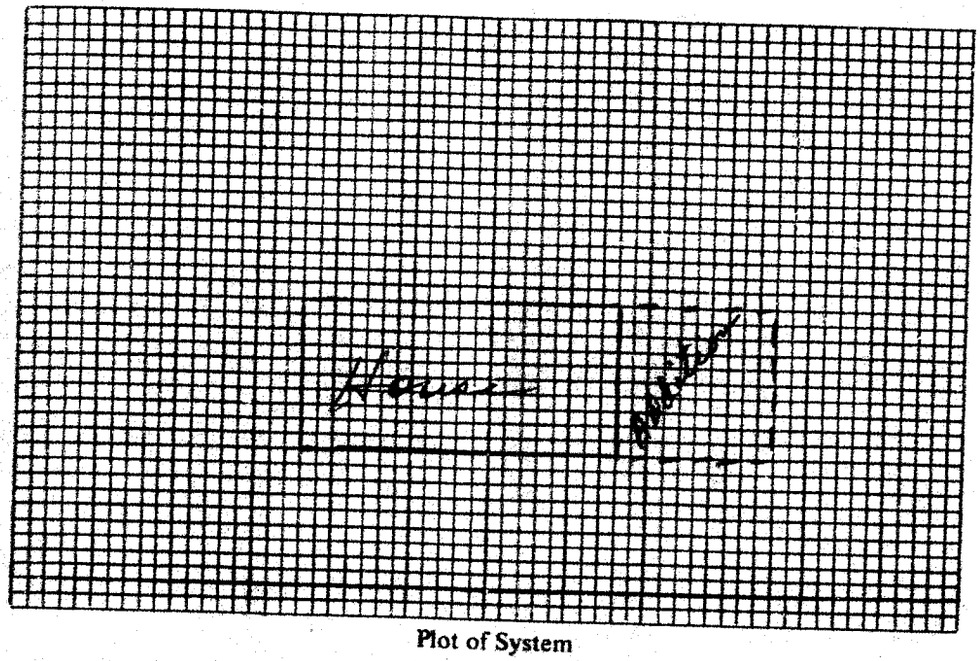
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area _____

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



Plot of System

Existing System
Size of Tank _____ Gals.
Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public ( )

Installed by _____

Adding 2 Rooms to Existing House

IMPROVEMENTS PERMIT BY _____

COMMENTS: Sewage System appears to be working satisfactorily at this time. If trouble develops will be repaired to Iredell County specifications

CERTIFICATE OF COMPLETION BY E. C. Stevenson DATE 9/8/76

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