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 Southern Furniture Co DATE 3/30/79 PERMIT NO. _____

PHONE: Business _____ Home Orbit Plant

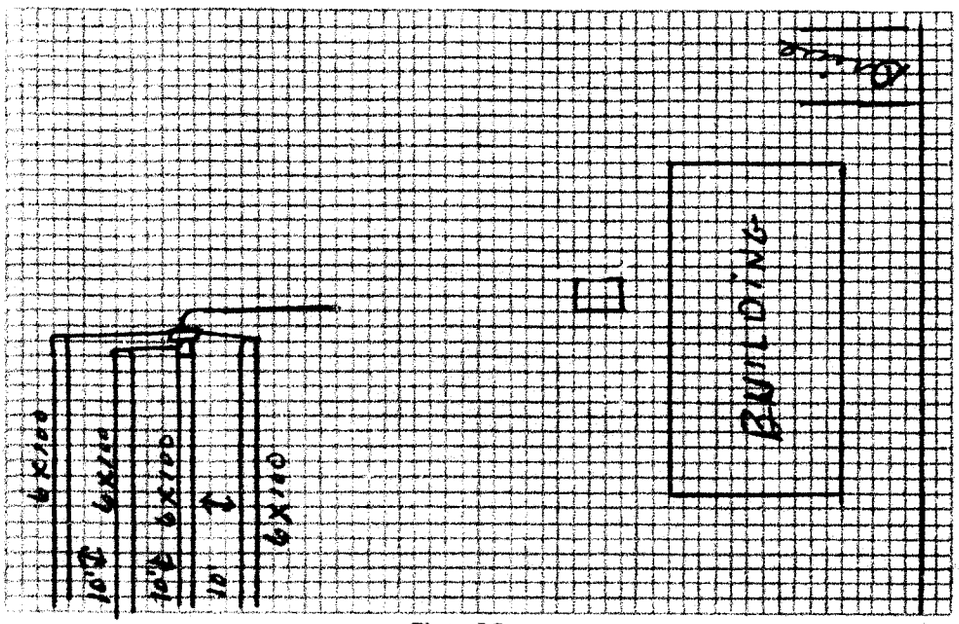
LOCATION Hwy # 90. Furniture Plant across from Scotts School. S. R. No. _____

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

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

No. Bedrooms _____	No. Bathrooms _____			Character & Porosity of Soil _____
Garbage Disposal Unit	Yes ( )	No ( )		Percolation Rate _____
Auto. Dishwasher	Yes ( )	No ( )		Topography _____
Auto. Wash. Machine	Yes ( )	No ( )		Depth to Water Table _____
Site Suitable	Yes ( )	No ( )		Rock or other impervious formations _____

Lot Area _____



Plot of System

Size of Tank Repair (1500) Gals.
Nitrification Field:
No. of Lines as shown (8)
Sq. Ft. 2400 Linear Ft. 800
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Donald Lackey

original installation 4/15/71 under Champion Furn Co.

IMPROVEMENTS PERMIT BY _____

COMMENTS: Surface water to be diverted away from septic tank drainfield. Southern Furn. Maintenance Crew to back from tank to main line. Will call when ready.

CERTIFICATE OF COMPLETION BY E. T. Stevenson DATE 3/30/79

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