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 Ethel Redmon DATE 10-23-73 PERMIT NO. _____

PHONE: Business 872-6571 Home _____

LOCATION Out Buffalo Shoals Rd. To E. Mocksville Rd #1332 - T.L. Then Turn R. 1st dirt Rd. T.R. again. Brown & White Trailer No. _____

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

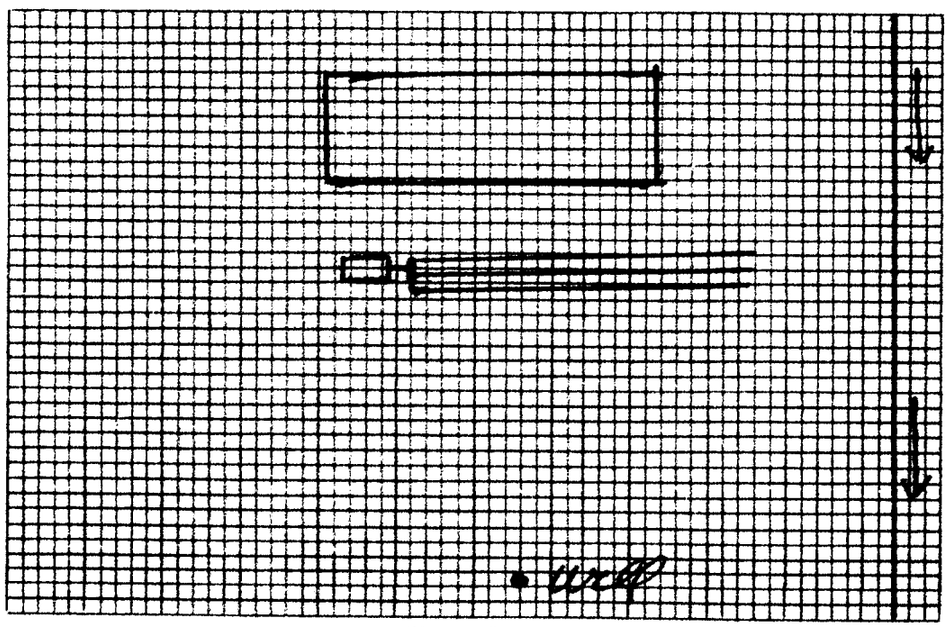
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 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 Red Clay
Percolation Rate No Perk Test
Topography Slightly Rolling
Depth to Water Table Low
Rock or other impervious formations None

Lot Area ½ Acre



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 562½ Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Lackey Bro.

IMPROVEMENTS PERMIT BY E. A. Stevenson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 10-30-73
By Glenn Fox

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