## 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 Wanda Akers DATE 11/19/79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Buffalo Shoals Rd-T.L. at Paradise Acres Rest Home on Rd #1333. T.R. on #1429. 2nd House on Rt. S. R. No. _____

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

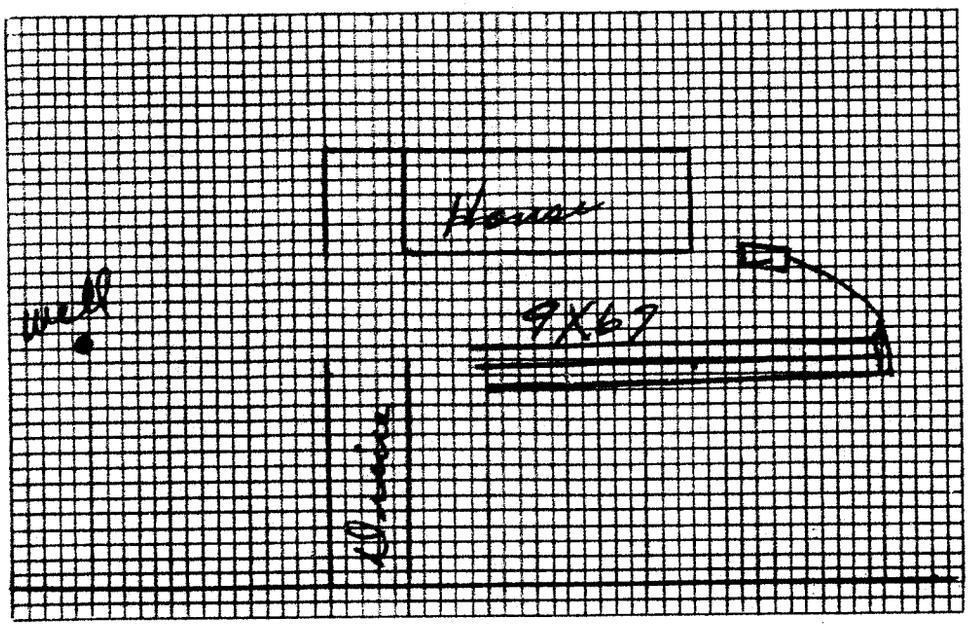
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

| | | | |
|---|---|---|---|
| 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 Rock Rock



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Hoke Septic Tank Co.

IMPROVEMENTS PERMIT BY _____

COMMENTS: Old tank Pumped, filled, & abandoned.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 11/19/79

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