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 David Harmon DATE 7/19/77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 64-70 W. Tk. on Old Mountain Rd. House on Rt. just beyond Lewis Ferry Rd. #1369 S. R. No. _____

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

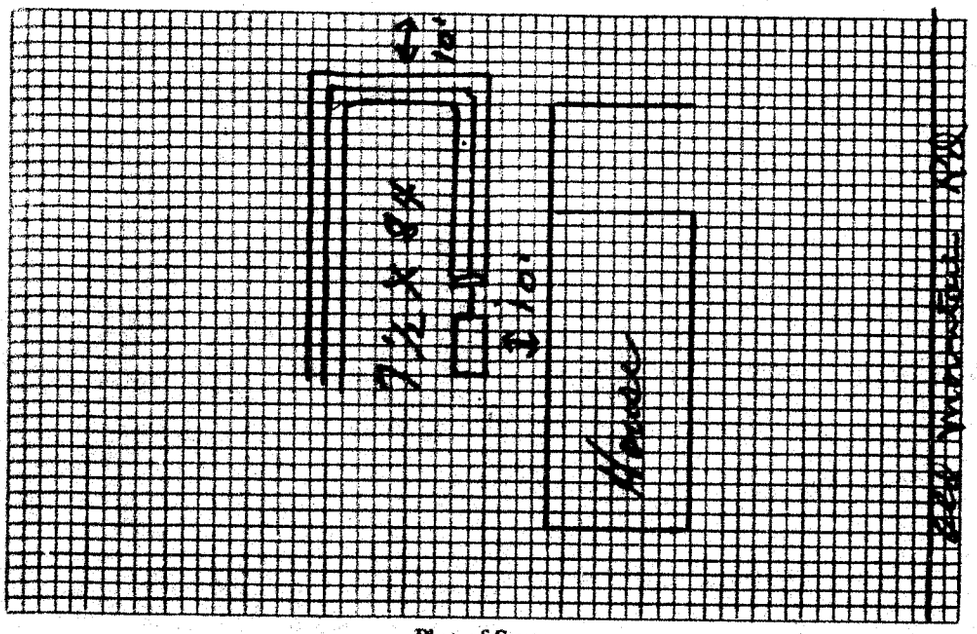
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 100 X 198

Character & Porosity of Soil Cecil Clay
Percolation Rate _____
Topography Slope to back
Depth to Water Table Low
Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Ross
Lincoln County

IMPROVEMENTS PERMIT BY _____

COMMENTS: Water from downspouts and all surface water possible to be diverted away from septic tank & lines.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 7/19/77

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