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 Coyte Anderson DATE 7-8-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 64-70 W. T.L. on old Mountain Rd. T.R. on Rd 1368- Then T.L. on Rd 1367 House on R. S. R. No. _____

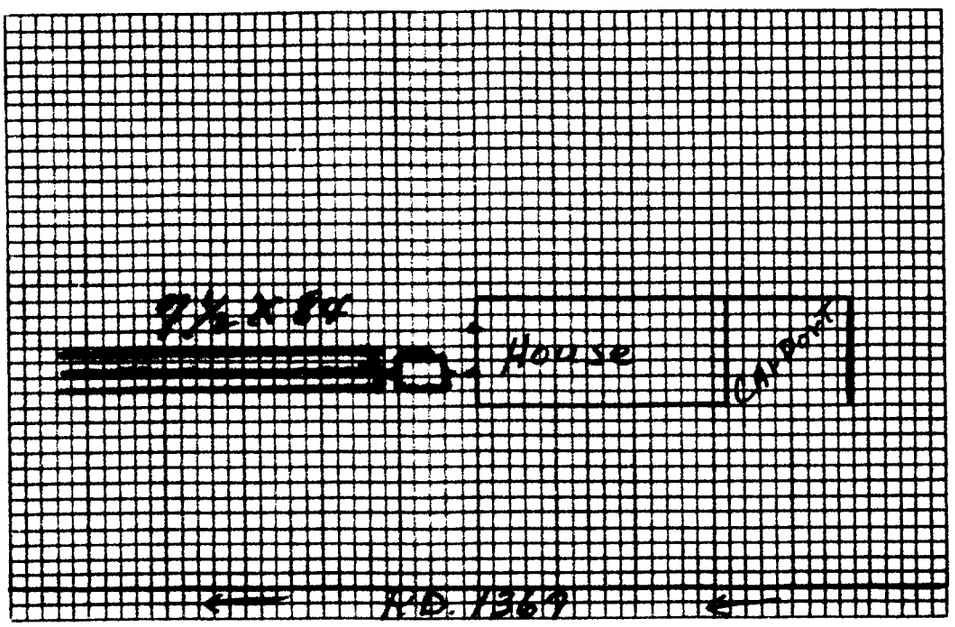
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Red Clay
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	No Perk Test made
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slight Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Low
			Rock or other impervious formations	

Lot Area 4.40 Acres



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Robert Hoke
R. E. Fox

IMPROVEMENTS PERMIT BY E. A. Stevenson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 7-8-74

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