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 Ronald Moore DATE 6/5/75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64.70W, T.L. on 1513, T.L. into Atkins Trailer Park

S. R. No. _____

SUBDIVISION NAME Atkins Trailer Park LOT NO. 7 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 ( )	

Lot Area _____

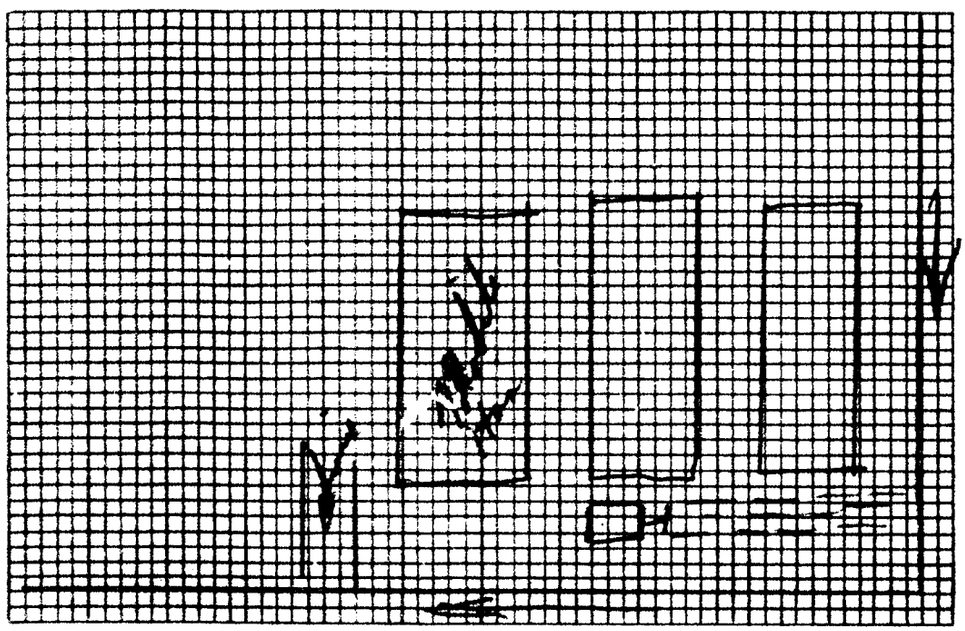
Character & Porosity of Soil Red Clay loam

Percolation Rate ok

Topography —

Depth to Water Table —

Rock or other impervious formations none observed



Plot of System

Size of Tank existing Gals.

Nitrification Field: system

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ( )
Public (✓)

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: System should function properly under normal usage

CERTIFICATE OF COMPLETION BY Andrew E. Carey DATE 6/5/75

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