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 Lucky Star Development Co. DATE 12/31/76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Carol Lynn Acres - Off of Hwy #90 Above ~~Dan~~ & Loray S. R. No. _____

SUBDIVISION NAME Carol Lynn Acres LOT NO. 47 SECTION OR BLOCK NO. _____

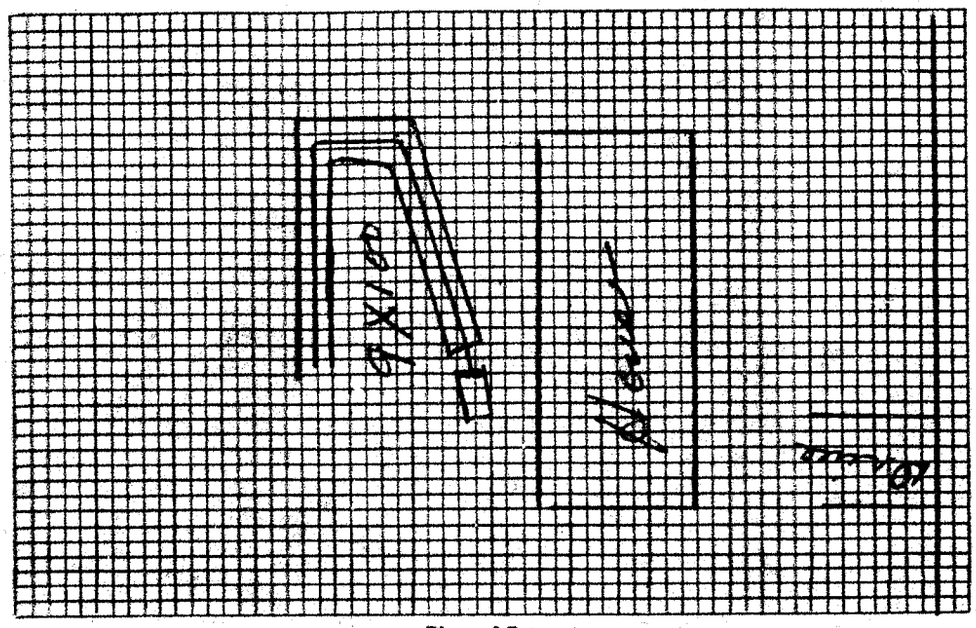
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1 1/2

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

Lot Area 100 X 300

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



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Harlan Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: Surface water and downspouts should be diverted away from Septic Tank & lines

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 12/31/76

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