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 Thomas Little DATE 12-18-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1/5 N - TL on SR 1571 (Boyd Rd.RD) Mobile Home on left behind Frame Home before Mt. Vernon AME Zion Ch. S. R. No. 1571

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. See Owners Property

House ( ) Mobile Home (✓) Business ( ) Other _____ Prop. Sanitation

No. Bedrooms 2 No. Bathrooms 2

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

Lot Area 1½ Acres

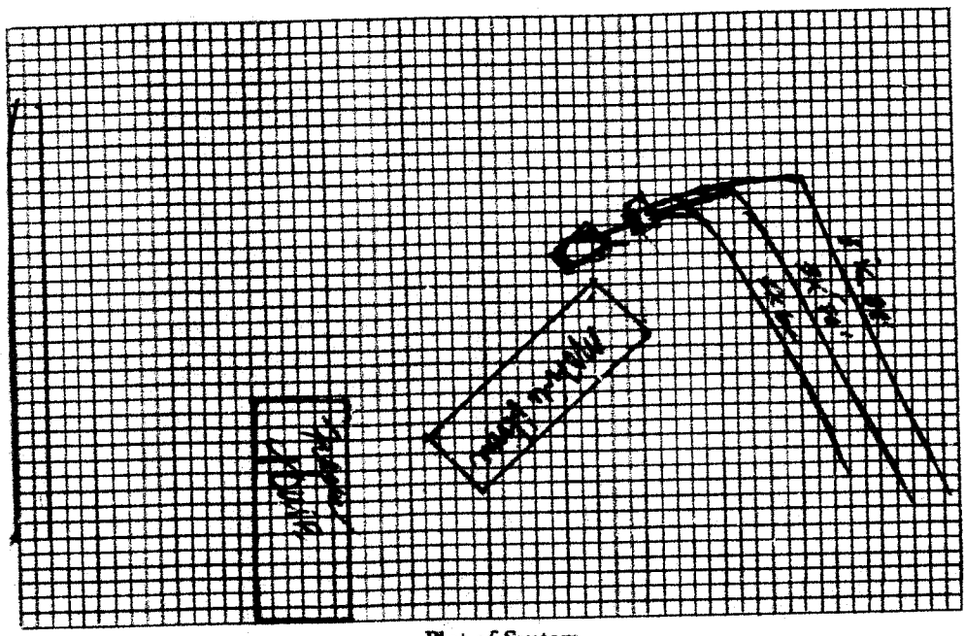
Character & Porosity of Soil CCB3

Percolation Rate _____

Topography Co-10% Slope

Depth to Water Table _____

Rock or other impervious formations Some Subsurface Rock



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 250 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Hoyle Ross Sullivan

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn M. Dr. DATE 12/18/79

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