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 B. F. Travis Asst. DATE 2-16-77 PERMIT NO _____

PHONE Business _____ Home _____

LOCATION Buffalo Shoals Rd. T.R. first East Airport Rd - Then T.L. on #1416 - Apt. House on Rt. _____ S. R. No. _____

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

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash Machine Yes ( ) No ( )

Lot Suitable Yes ( ) No ( )

Lot Area _____

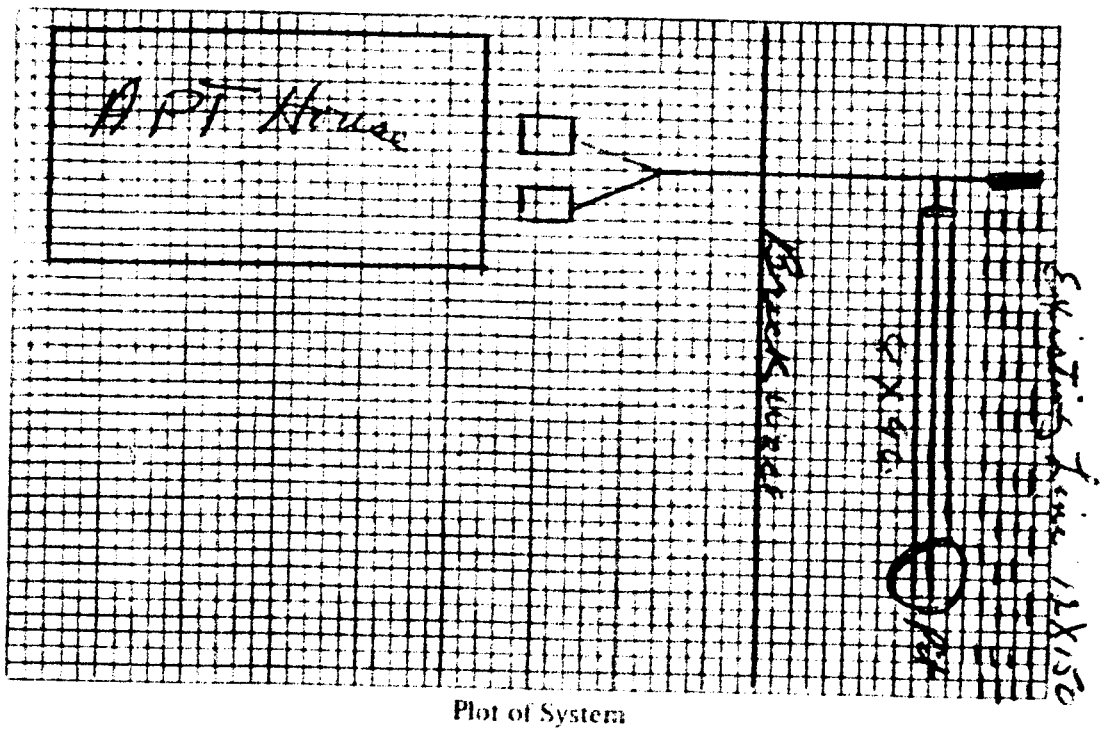
Character & Porosity of Soil _____

Percolation Rate _____

Topography _____

Depth to Water Table _____

Rock or other impervious formations Repair



Plot of System

Size of Tank Repair Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 768 Linear Ft. 288

Depth of Stone in Lines 18" +

Water Supply: Individual (✓)

Public ( )

Installed by Henry Sigmon

approx 65 Ton Stone used

IMPROVEMENTS PERMIT BY _____

COMMENTS Drainage ditch to be cut above old line and graded so water will drain away from old line. Poor Soil but only feasible place to go with repair

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 2-16-77

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