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 Hoke Bro. Builders DATE 8-20-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Westover Sub Division Off of Westminster Drive

SUBDIVISION NAME Westover LOT NO. 19 S. R. No. _____ SECTION OR BLOCK NO. _____

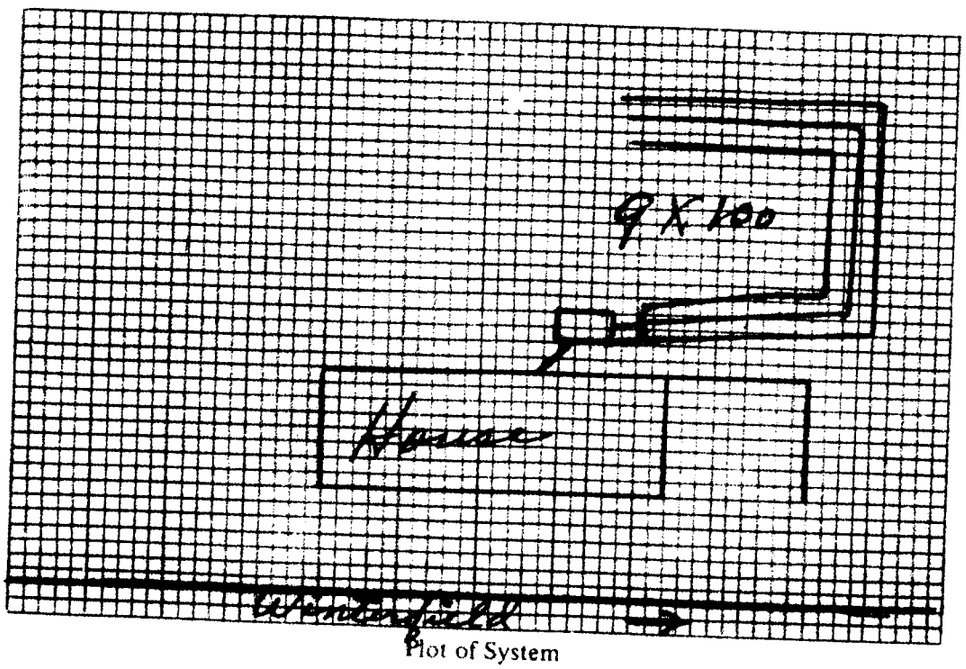
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 15000 sq ft

Character & Porosity of Soil Red Clay
Percolation Rate No Perk Test
Topography Slope to E Side
Depth to Water Table Low
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 Hoke Bro

IMPROVEMENTS PERMIT BY _____

COMMENTS: Lines are deep but good soil found in bottom of ditch.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 8-20-74

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