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 M & F. Sales DATE 3-15-74 PERMIT NO. _____

PHONE: Business _____ Home _____

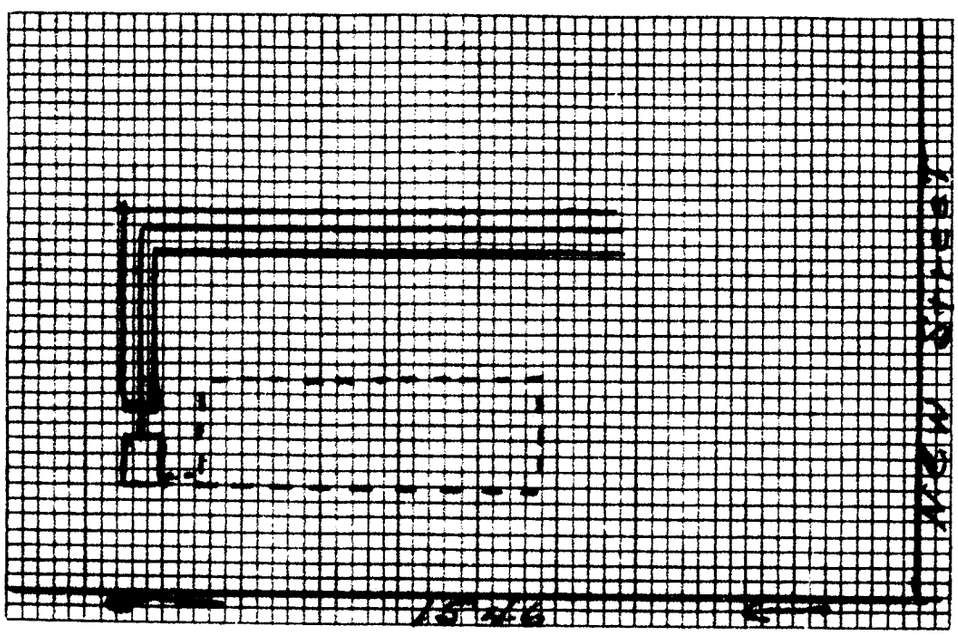
LOCATION Hwy # 90 - T.R. on Rd 1546 To Grayson Park 4th Trailer on R. Facing # 1546 S. R. No. 1546

SUBDIVISION NAME Grayson Park LOT NO. 31 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 ( )
Site Suitable Yes (✓) No ( )
Lot Area 75 X 150

Character & Porosity of Soil Red Clay
Percolation Rate No Perc Test
Topography Slight slope to front
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. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)

Installed by Jenkins Builders

IMPROVEMENTS PERMIT BY E. A. Stevenson

COMMENTS: Trailer Not on Lot at time of inspection

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 3-15-74

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