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 W.B. Hager DATE 3/15/76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 90N - T. Lon Rd #1515 at Fusion Rubbermaid Plant trailer on left at big Chicken House S. R. No. 1515

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

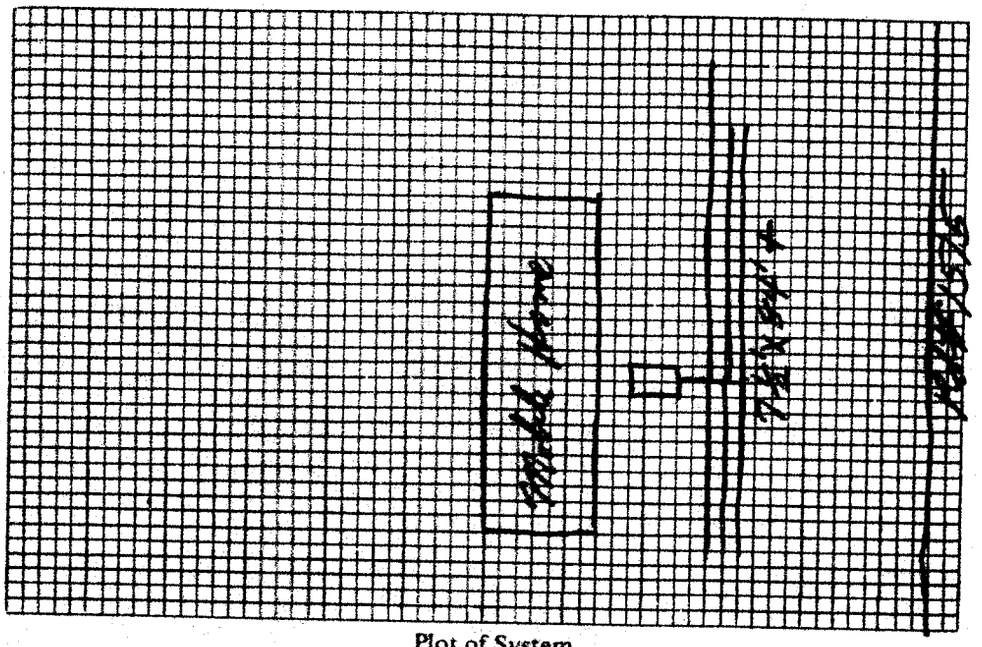
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 4½ acres

Character & Porosity of Soil Coil Clay
Percolation Rate _____
Topography slight slope to rear
Depth to Water Table Low
Rock or other impervious formations none found



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 Donald Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew E. Cowan DATE 3/15/76

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