## 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+T Sales DATE 2/15/78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Grayson Park Mobile Home Park

S. R. No. _____

SUBDIVISION NAME Grayson Park LOT NO. 10A SECTION OR BLOCK NO. _____

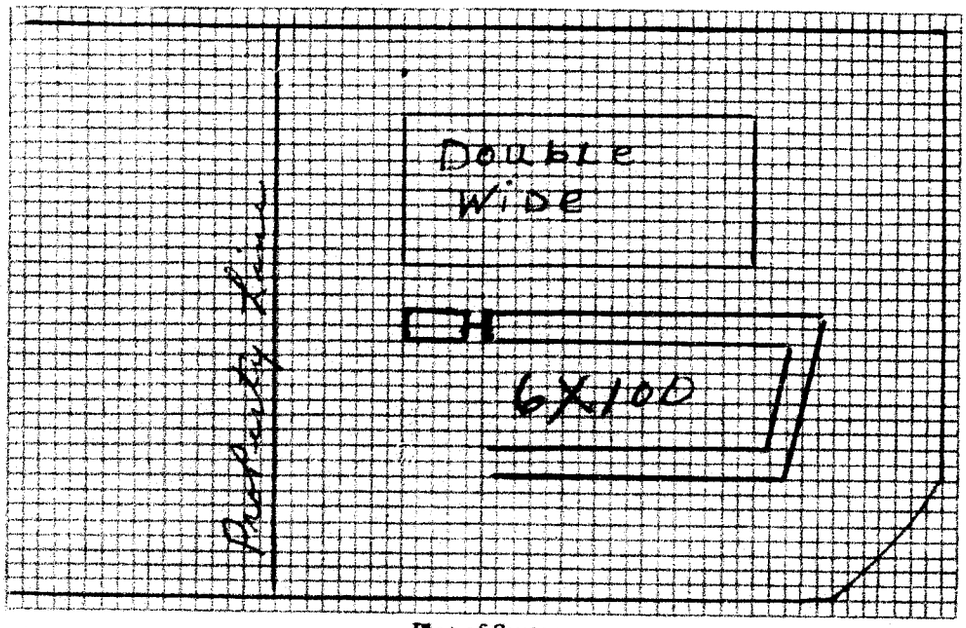
House ( ) Mobile Home (✓) Business ( ) Other _____

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 20,000 Sq Ft

Character & Porosity of Soil Prov Suitable
Percolation Rate _____
Topography Slope
Depth to Water Table Low
Rock or other impervious formations None




Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Eddie Jountz & Son

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 2/15/78

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