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. A. Daniels DATE 12/12/77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Northmont Subdivision off of old Wilkesboro Rd. House on Morrison Drive S. R. No. _____

SUBDIVISION NAME Northmont LOT NO. 29 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 3

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 20 000 Sq ft

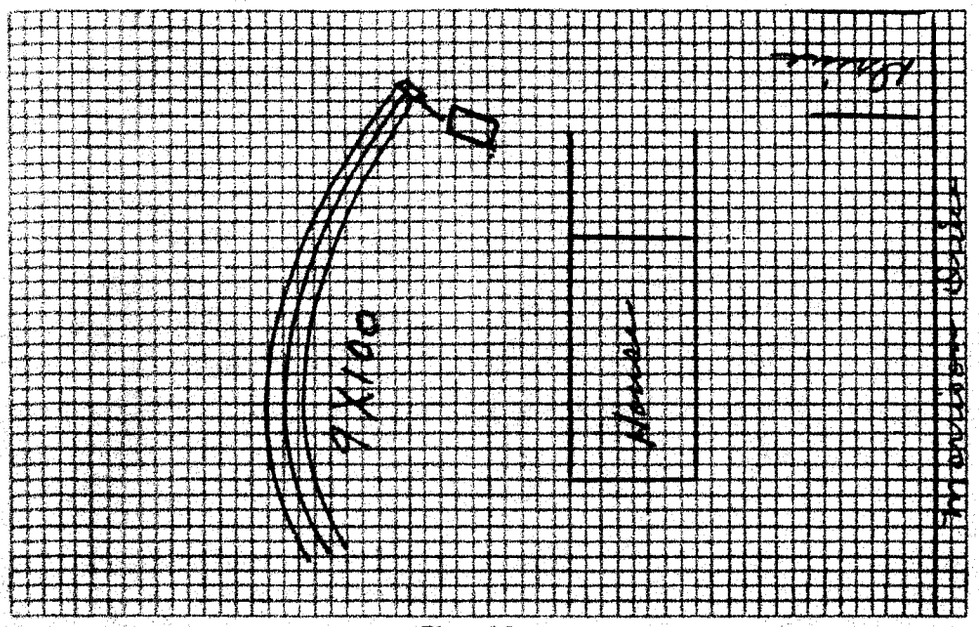
Character & Porosity of Soil Prov. Suitable

Percolation Rate _____

Topography Slope Low

Depth to Water Table _____

Rock or other impervious formations None



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 16"

Water Supply: Individual ( )

Public (✓)

Installed by Daniels

IMPROVEMENTS PERMIT BY _____

COMMENTS: Lines are deep.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 12/12/77

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