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 William Vinson DATE 2-19-74 PERMIT NO. _____

PHONE Business _____ Home _____

LOCATION Hwy 115 N- House and Lawn Mower Ser across from Central School S. R. No. _____

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

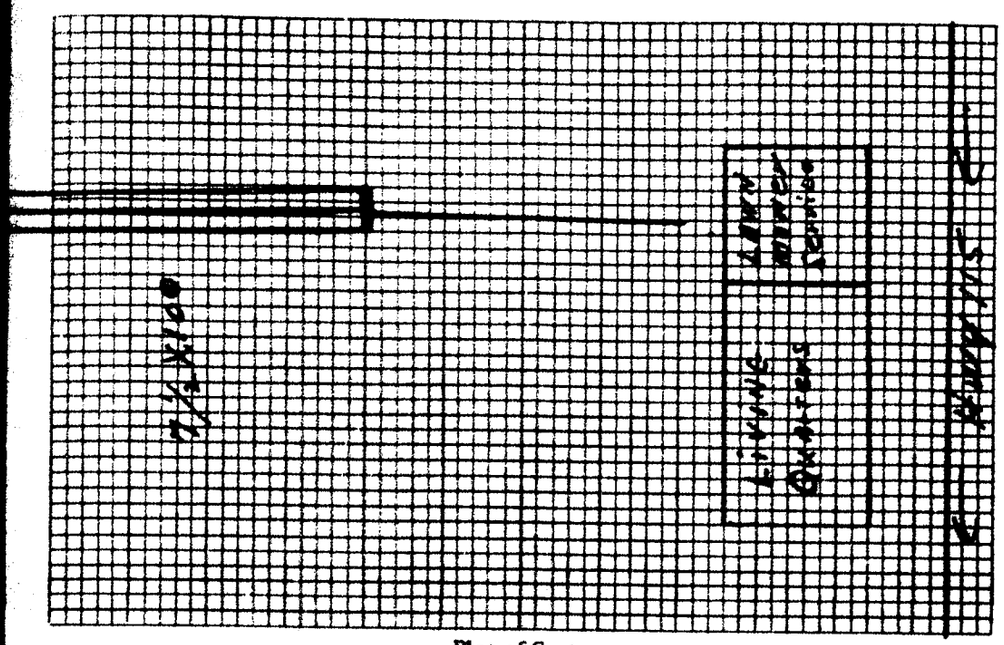
House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 2

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

Lot Area _____

Character & Porosity of Soil _____
Percolation Rate _____
Topography Repair
Depth to Water Table _____
Rock or other impervious formations _____



Plot of System

Size of Tank Old Tank – Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 300
Depth of Stone in Lines _____
Water Supply: Individual (✓)
Public (—)

Installed by Herman Gibson

IMPROVEMENTS PERMIT BY E. G. Stevenson

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. G. Stevenson DATE 2-22-74

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