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 Nathan Bay Summers DATE 10-10-73 PERMIT NO. _____

PHONE: Business _____ Home 872-2783

LOCATION Hwy 115 N To Rd # 1651. T.L. 1st 2 Trailers on R

S. R. No. _____

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

House ( ) Mobile Home (✓) 2 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 269 x 123

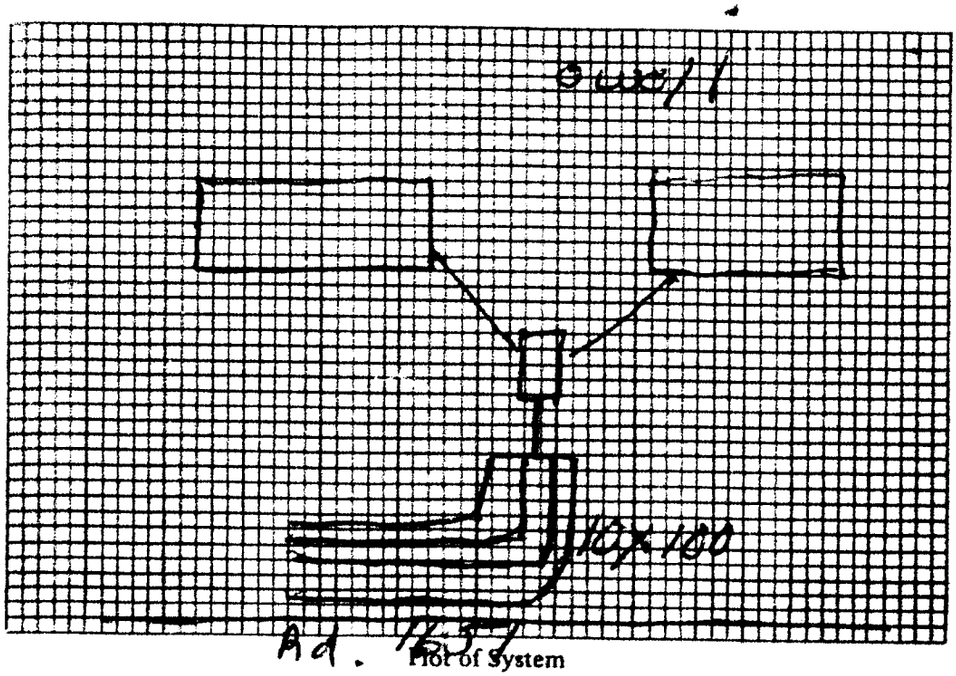
Character & Porosity of Soil Red Clay

Percolation Rate _____

Topography Rolling

Depth to Water Table _____

Rock or other impervious formations _____



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1000 Linear Ft. 400
Depth of Stone in Lines 18

Water Supply: Individual (✓)
Public ( )

Installed by Lackey Brothers

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. David Gabriel DATE 10-10-73

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