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 Frederick Hawkins DATE 2 July 75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 115 N. 3rd house on right of the prong Lewis Creek Rd. S. R. No. _____

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

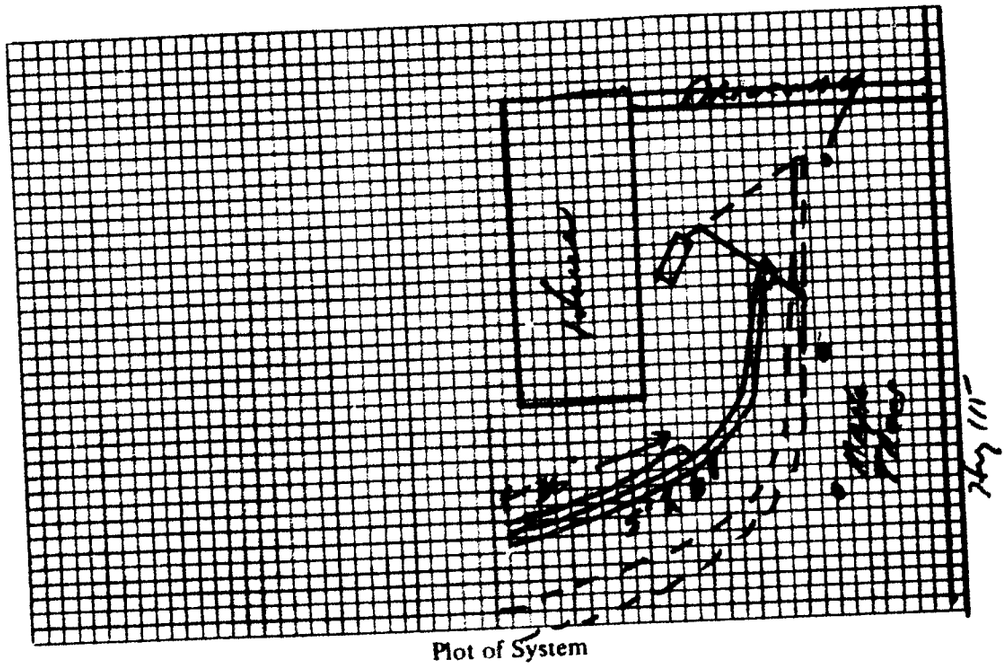
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1½

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

Character & Porosity of Soil Cecil Clay
Percolation Rate none
Topography Good
Depth to Water Table ok
Rock or other impervious formations ok

Lot Area _____



Plot of System

Size of Tank Ryan Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 375 Linear Ft. 150
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Thomas Allen

IMPROVEMENTS PERMIT BY _____

COMMENTS: Left hold tank connected.

CERTIFICATE OF COMPLETION BY Mitt Stevens DATE _____

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