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 T. C. Ostwalt DATE 5/9/77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Turn on E. Mombo Rd at Troutman. Go apprx. 1½ miles to big 2 story unpainted house on L. S. R. No. 1328

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

House (✓) Mobile Home ( ) 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 Acreage

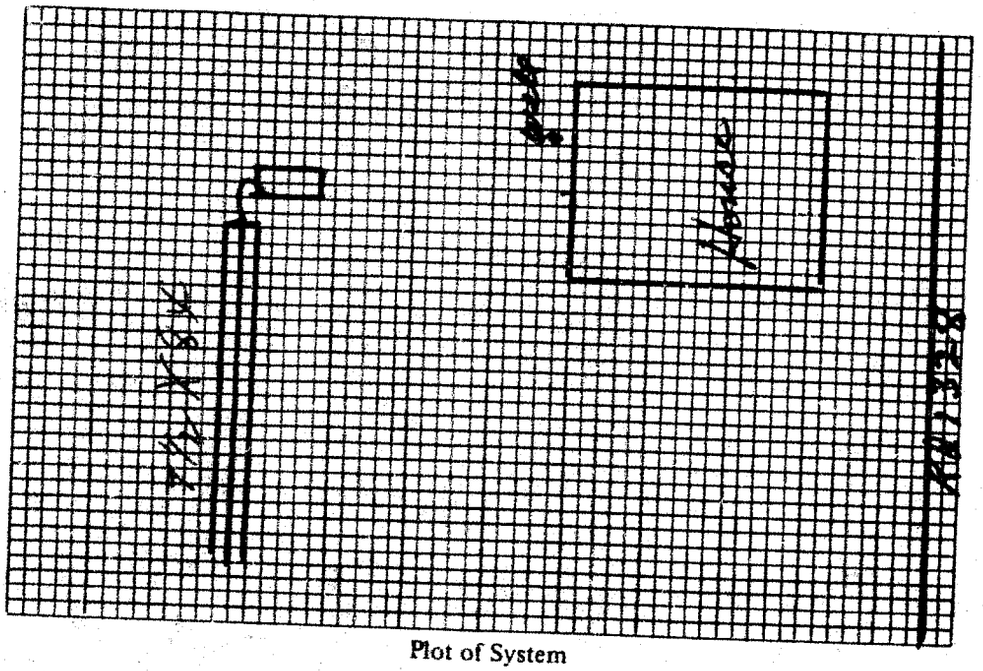
Character & Porosity of Soil _____

Percolation Rate _____

Topography Existing House

Depth to Water Table _____

Rock or other impervious formations Adding Bathroom



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Sam Ostwalt

IMPROVEMENTS PERMIT BY _____

COMMENTS: Bathroom added to existing house

CERTIFICATE OF COMPLETION BY E. G. Stevenson DATE 5/9/77

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