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 H. B. Shaver DATE 7-3-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 S. to 2347 Turn left (Eagle Field Camp), turn left on 2345, go to stop sign Turn Rt, go to 2460 Turn Left S. R. No. _____

SUBDIVISION NAME _____ LOT NO. 3 SECTION OR BLOCK NO. _____

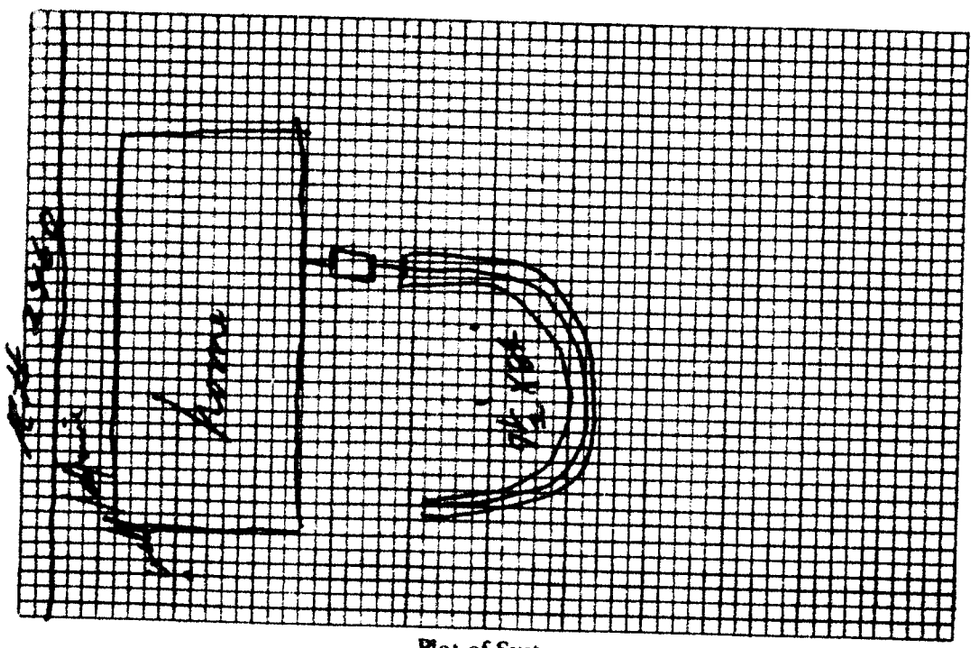
at Arbu Acres - 3rd House on Rt

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Red Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	—
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope to Rt Rear
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	—
			Rock or other impervious formations	—

Lot Area 24,000 approx



Plot of System

Size of Tank 1,000 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 San O'Neil

IMPROVEMENTS PERMIT BY _____

COMMENTS: 60' from well

CERTIFICATE OF COMPLETION BY Andrew E. Carey DATE 7-3-74

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