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 Alex Summers DATE 11-29-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Chipley Ford Rd to 1911 T.R. then T.R. on 1912. Big Brick house on L. S. R. No. 1912

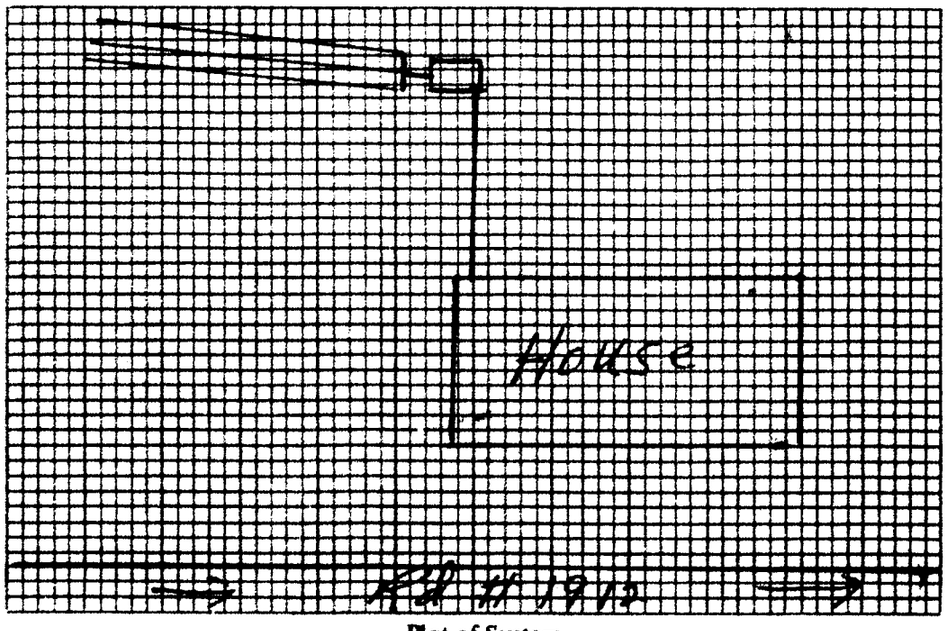
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Red Clay	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	No Perk Test	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Sloping to Level	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table		
			Rock or other impervious formations	None	

Lot Area Acreage



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 562½ Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Lackey Bro

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 11-29-73

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