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 James Newton DATE May 25 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21W to Fort Dobbs Rd. Left to Mt 1925 on Right just before creek Tile. Left 2nd Dirt road on left. 1st house on right S. R. No. _____

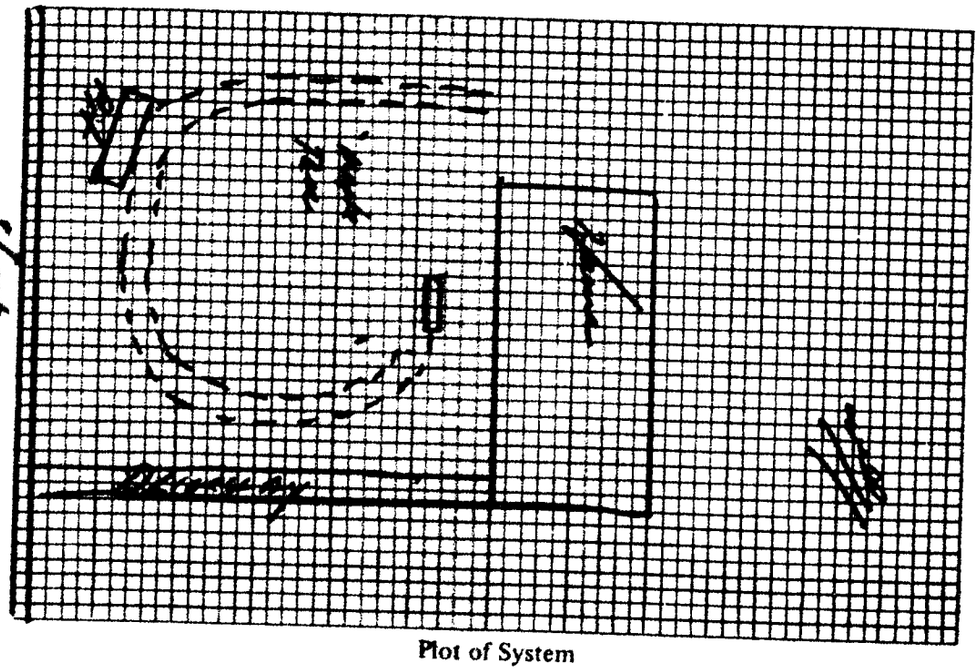
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sand Clay Loam
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	30
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope Level
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	10'
			Rock or other impervious formations	4'

Lot Area _____



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by Henry Aspen

IMPROVEMENTS PERMIT BY _____

COMMENTS: Lines leveling out at low point of lines - 3'x18'x12' pit. 16 ton stone - extra soil filled over low area - fine clay base 4' pt. maple tree and maple stump removed

CERTIFICATE OF COMPLETION BY W. M. Howard 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