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 Bill Mills DATE 9/20/79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Cleveland Ford Rd N., in front of Brooks Acres

S. R. No. _____

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

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

No. Bedrooms _____ No. Bathrooms _____

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

Character & Porosity of Soil Red Clay Loam

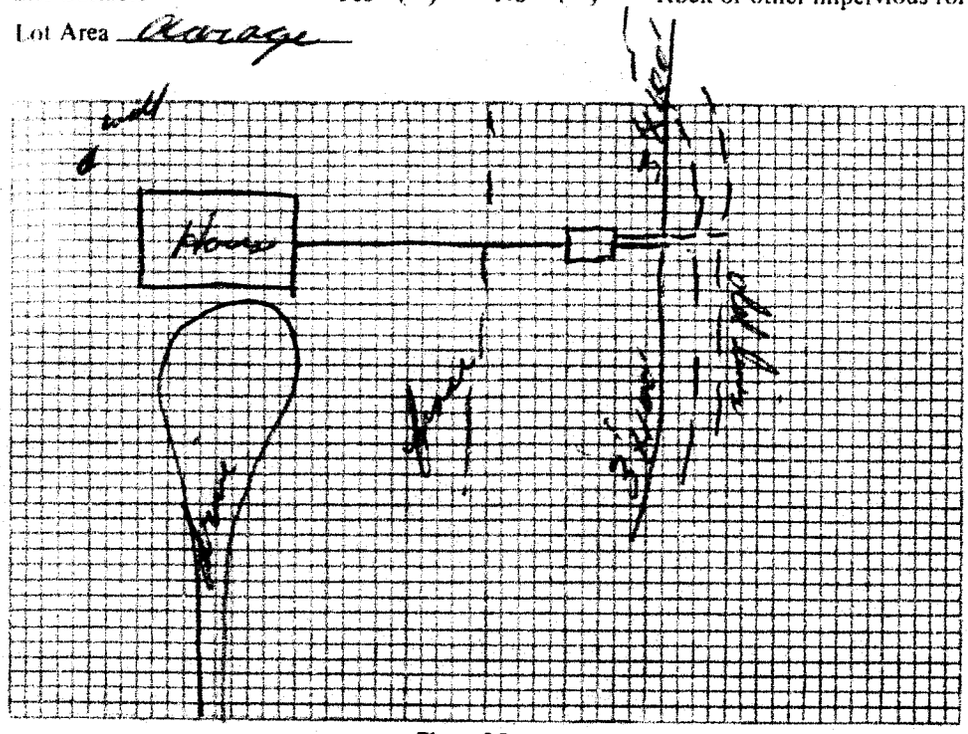
Percolation Rate not 120 min/inch

Topography 2-6%

Depth to Water Table 104

Rock or other impervious formations none

Lot Area Garage



Plot of System

Size of Tank existing Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft 200
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Sam Osteen

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Andrew E. Lowry DATE 9/20/79

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