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 Ralph Porter DATE 9-20-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Shipley Ford Rd # 1907 + R on Porter St.

S. R. No. _____

SUBDIVISION NAME Presley Acres LOT NO. 12 R SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 100 X 211

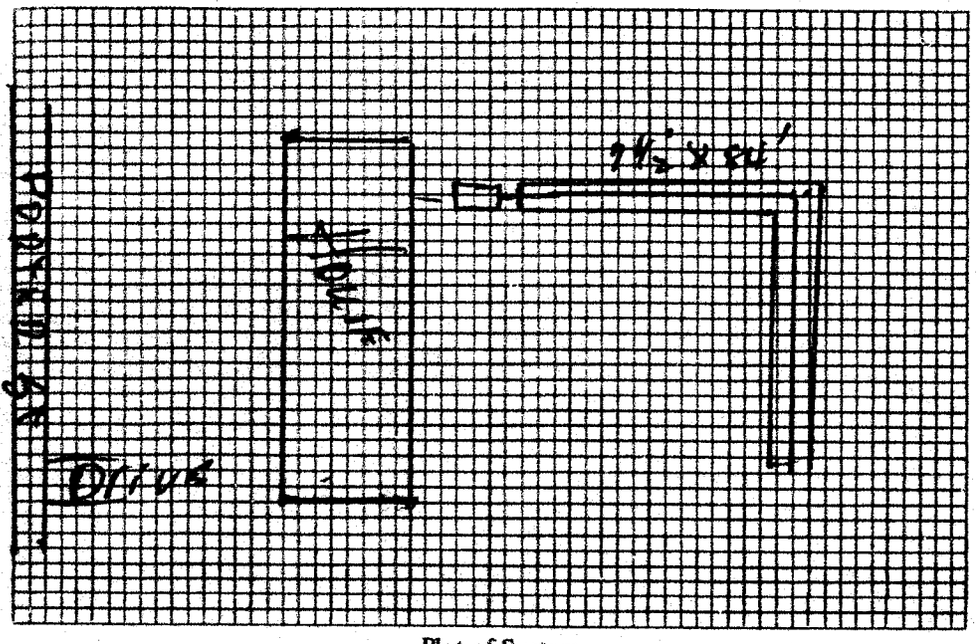
Character & Porosity of Soil CL Fr

Percolation Rate 1 Gal

Topography 2 - 6% Slope

Depth to Water Table ———

Rock or other impervious formations ———



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 621 Linear Ft. 210

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by Daniel Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Todd DATE 9/29/77

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