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 Tom Winslow DATE 11/23/76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 21 S. Below Troutman - House beside Frueze Esso. South Corner of Hwy 21 & 1318 R. No. _____

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

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

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area _____

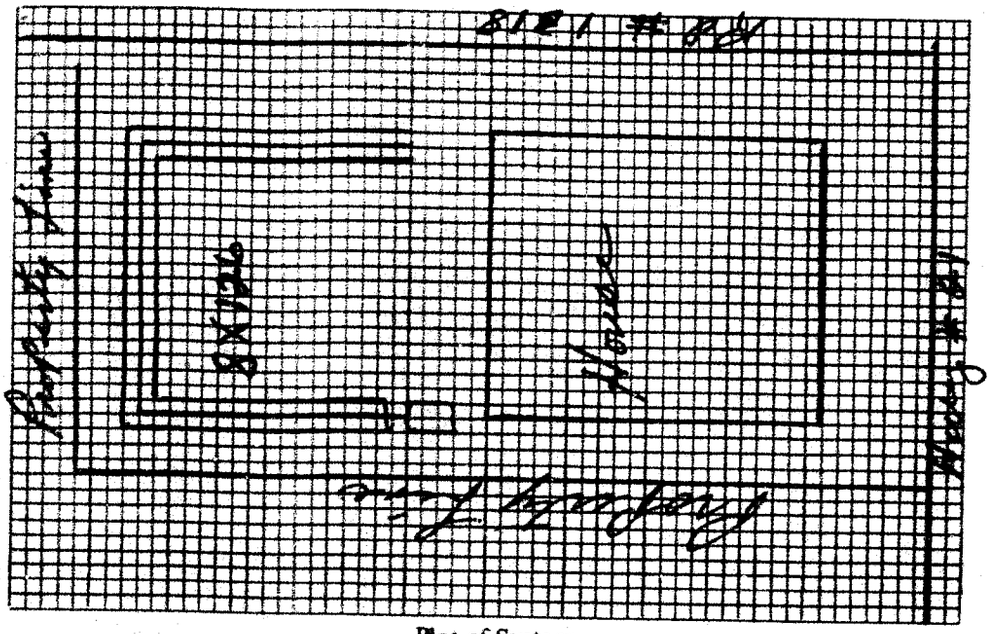
Character & Porosity of Soil _____

Percolation Rate _____

Topography _____

Depth to Water Table Repair

Rock or other impervious formations _____



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 1008 Linear Ft. 378

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

well across Street

Installed by Sam Ostwalt

IMPROVEMENTS PERMIT BY _____

COMMENTS: Due to small lot + limited space no more line could be put in.

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 11/23/76

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