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 Lois Clark DATE 1-5-84 PERMIT NO.

PHONE: Business Home

LOCATION US 21 South Tl on 1001 at Oswalt Cross I-77 Turn 1st Drive To left, mH on left.

SUBDIVISION NAME S. R. No.

LOT NO. SECTION OR BLOCK NO.

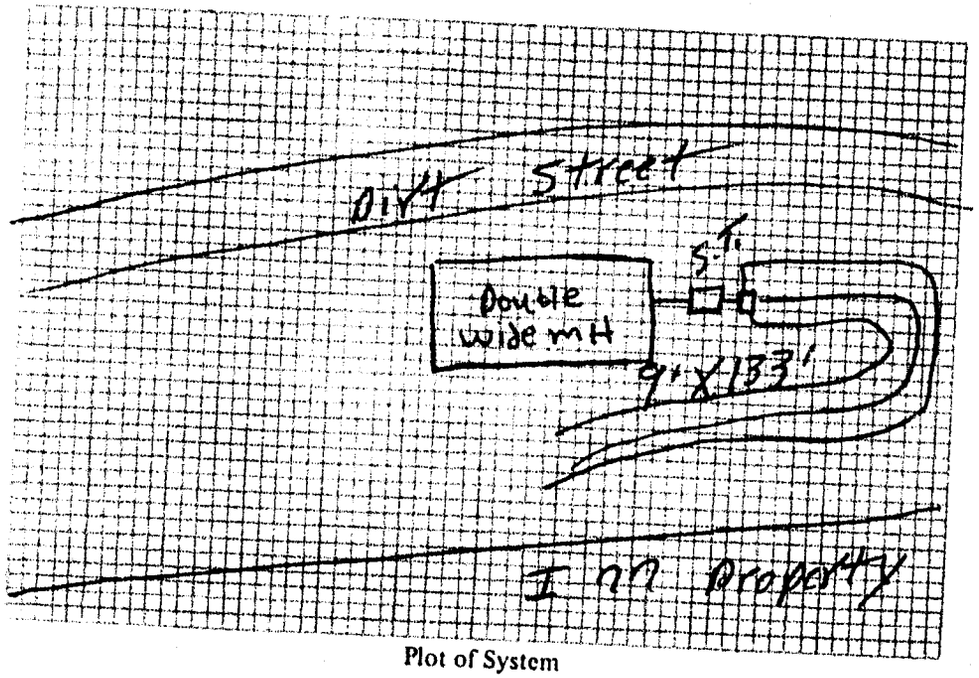
House ( ) Mobile Home (✓) Business ( ) Other

No. Bedrooms 4 No. Bathrooms 2

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

Lot Area 1 acre

Character & Porosity of Soil Clay/loam
Percolation Rate .6 gal/ss/day
Topography 2 to 6%
Depth to Water Table 10'+
Rock or other impervious formations none



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )
well next door

Installed by Roger Sigmon

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed:

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS:

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 1-5-84

EXISTING SYSTEM CHECKED BY: DATE

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.
Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold