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 J. W. Spivey DATE 10-24-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N TL on Rd # 1922 – TL on Rd # 1924 (Wilson Road) on Rt across from City of Statesville Cemetery S. R. No. 1924

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

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

No. Bedrooms 3 No. Bathrooms 3

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

Lot Area 4.4 acres

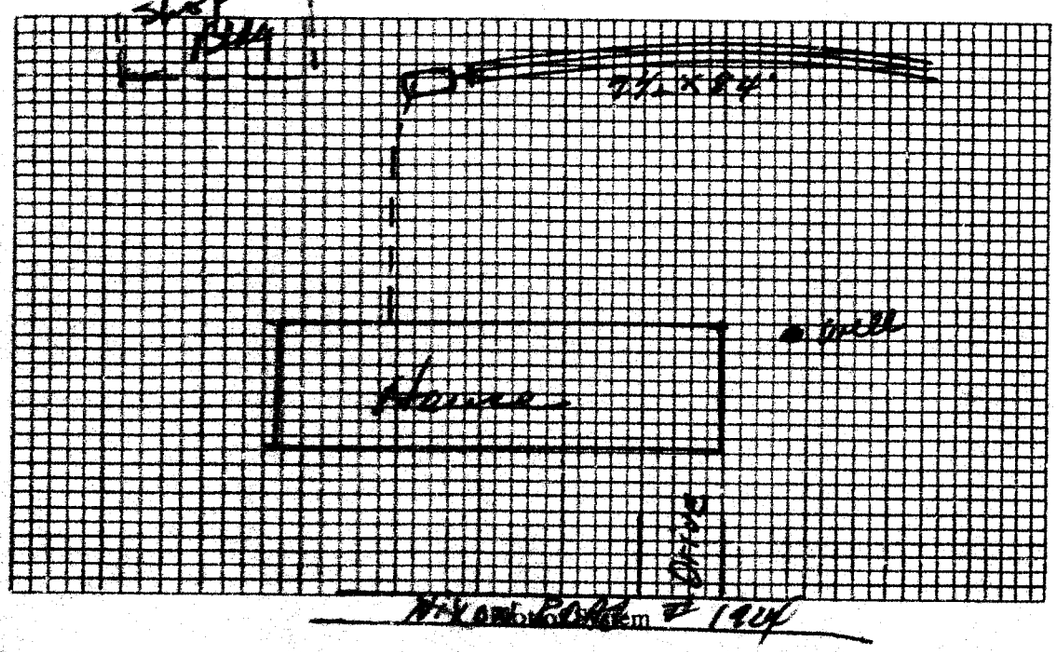
Character & Porosity of Soil Cecil Clay

Percolation Rate Fair

Topography Slope to back

Depth to Water Table mod

Rock or other impervious formations None



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 630 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Lackey Bros

IMPROVEMENTS PERMIT BY _____

COMMENTS: Home const. started about 5 yrs ago.

CERTIFICATE OF COMPLETION BY Glenn Fox Jr DATE 10/24/75

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