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 Donell Wyatt DATE 13 Apr 77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21N - T.L. on Shumate Dr. 3rd house on left before Avon Rd.

S. R. No. _____

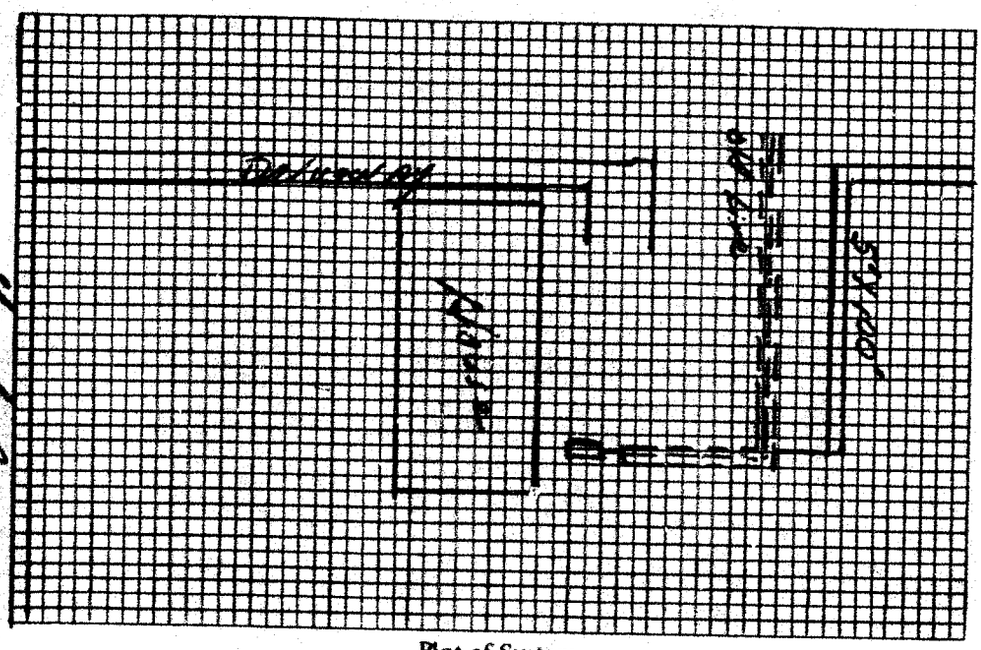
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Red Cly. - Loam
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	none
Auto. Wash. Machine	Yes ( )	No ( )	Topography	2-6% Slope
Site Suitable	Yes ( )	No ( )	Depth to Water Table	wl
			Rock or other impervious formations	wl

Lot Area _____



Plot of System

Size of Tank County Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 500 Linear Ft. 200

Depth of Stone in Lines 6"

Water Supply: Individual ( )
Public (✓)

Installed by Harry Cope

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY W. R. Thurmond DATE 13 Apr 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