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 Hale Pratt DATE 5-11-77 PERMIT NO. ______

PHONE: Business ______ Home ______

LOCATION Polly Dr. (R.P. PRICE HOUSE)

S. R. No. ______

SUBDIVISION NAME Ardelle Height #2 LOT NO. ______ SECTION OR BLOCK NO. ______

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

No. Bedrooms ______ No. Bathrooms ______ Repair

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area ______

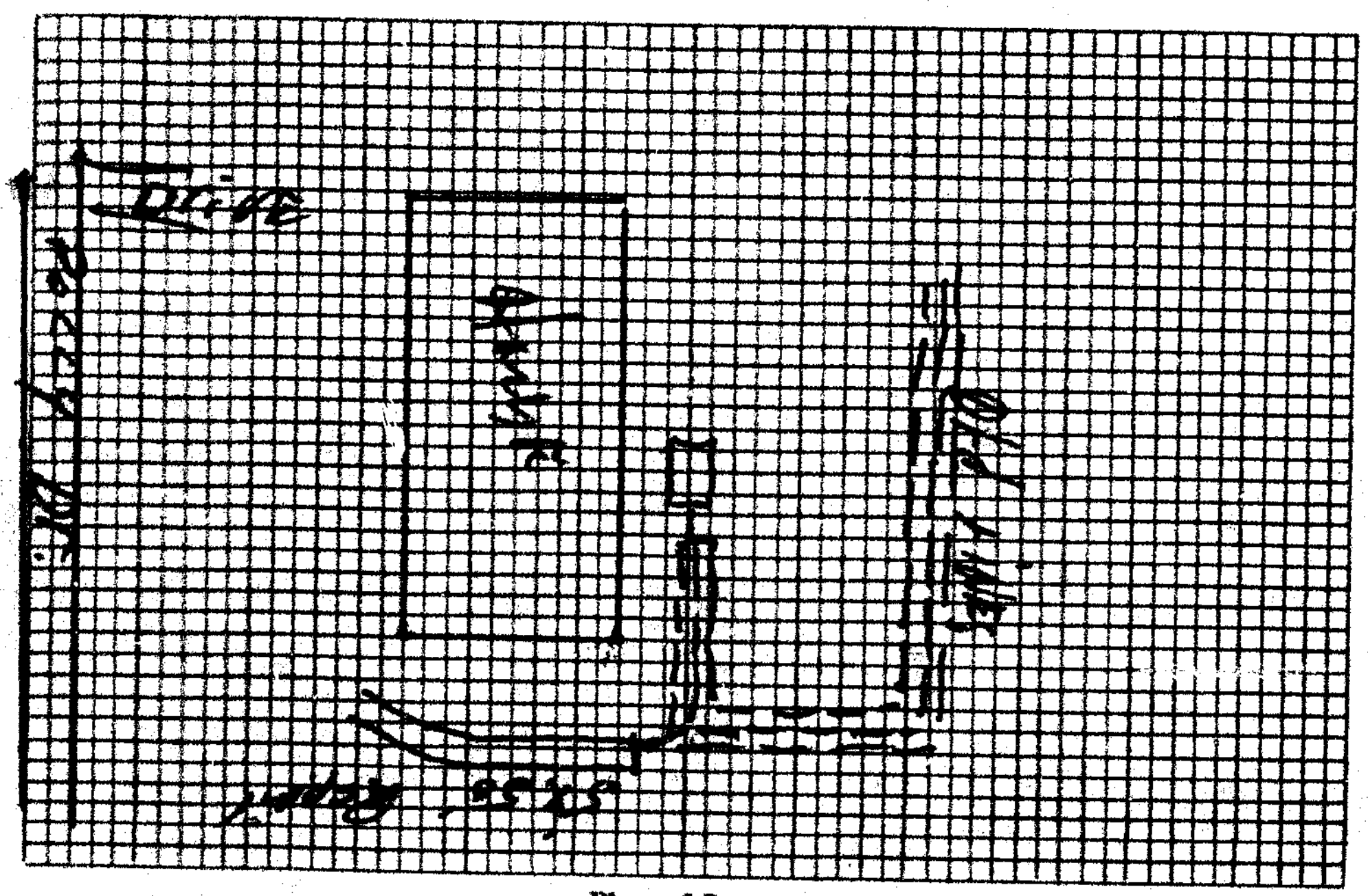
Character & Porosity of Soil ______

Percolation Rate Existing

Topography ______

Depth to Water Table ______

Rock or other impervious formations ______



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 250 Linear Ft. 100

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by Hale Septic Tank Serv.

IMPROVEMENTS PERMIT BY ______

COMMENTS: ______

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 5/11/77

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