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 Tarus Textile DATE 5-29-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION US 21 N TL on Jennings Rd Cross I-77 TL on Street Building on left. S. R. No. _____

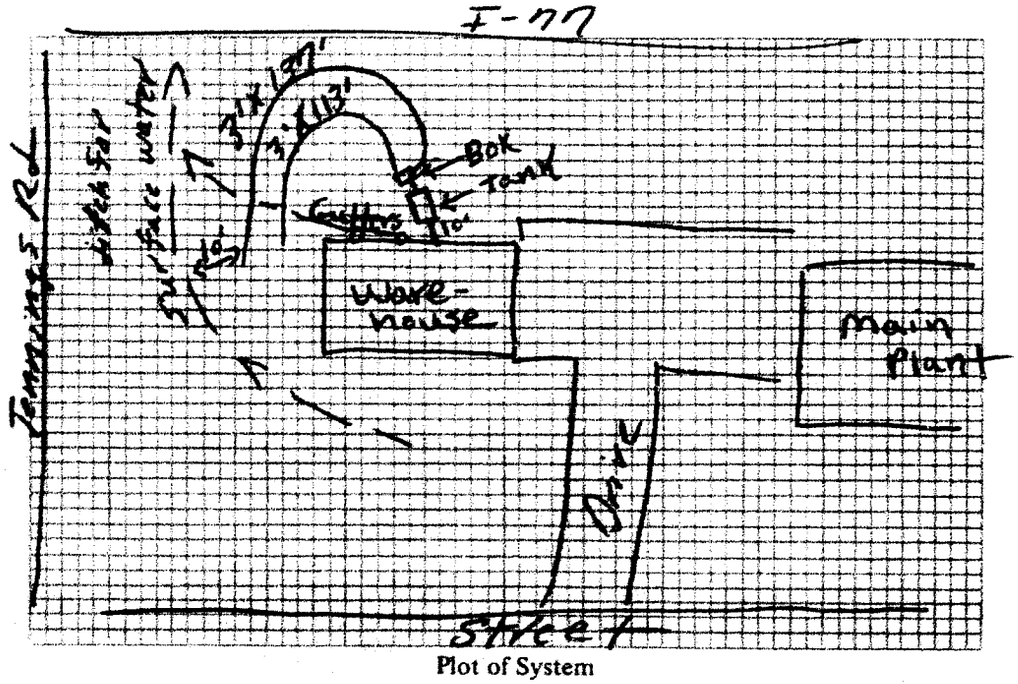
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Warehouse 2 to 5 Employees

No. Bedrooms _____ No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	cecil sandy clay loam
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	60 min/inch
Auto. Wash. Machine	Yes ( )	No ( )	Topography	2 to 4% slope
Site Suitable	Yes ( )	No ( )	Depth to Water Table	10'+
			Rock or other impervious formations	none

Lot Area _____



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Don Lackey

IMPROVEMENTS PERMIT BY S. C. Moore

COMMENTS: Pipe Gutters & grade lot so water will not stand over Tank or lines.

CERTIFICATE OF COMPLETION BY S. C. Moore DATE 5-29-79

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