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 Samuel B. Reid DATE 11-13-78 PERMIT NO. _____

PHONE: Business _____ Home _____

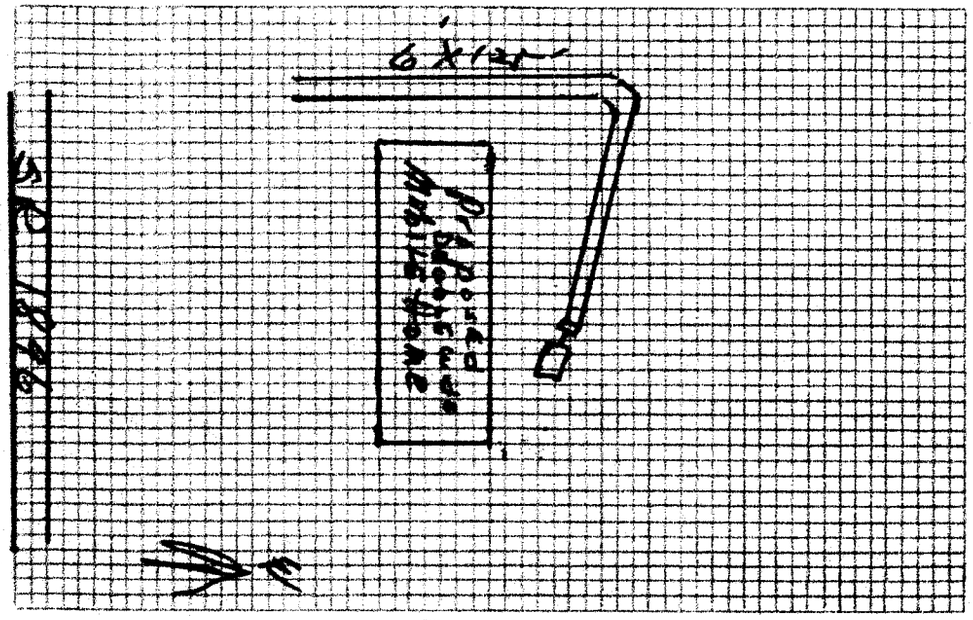
LOCATION 21 N. Tl on Downings Rd. 1892 Tl on SR 1896 - 1st Double Wide Mobile Home on Rt. S. R. No. _____

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

House ( ) Mobile Home (✓) Double Wide Business ( ) Other _____ Prov. Institute

No. Bedrooms	3	No. Bathrooms	2	Character & Porosity of Soil	C M Bl
Garbage Disposal Unit	Yes ( )	No	(✓)	Percolation Rate	
Auto. Dishwasher	Yes (✓)	No	( )	Topography	2-6% Slope
Auto. Wash. Machine	Yes (✓)	No	( )	Depth to Water Table	Unk
Site Suitable	Yes (✓)	No	( )	Rock or other impervious formations	None

Lot Area 1.53 Acres



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 250 Linear Ft. 250

Depth of Stone in Lines 16"

Water Supply: Individual (✓)

Public ( )

Installed by Ray Lentz

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 11/13/78

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