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 Wade Henderson DATE 7-27-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Shiloh church Rt cross 3rt creek 1/2mi on right. S. R. No. _____

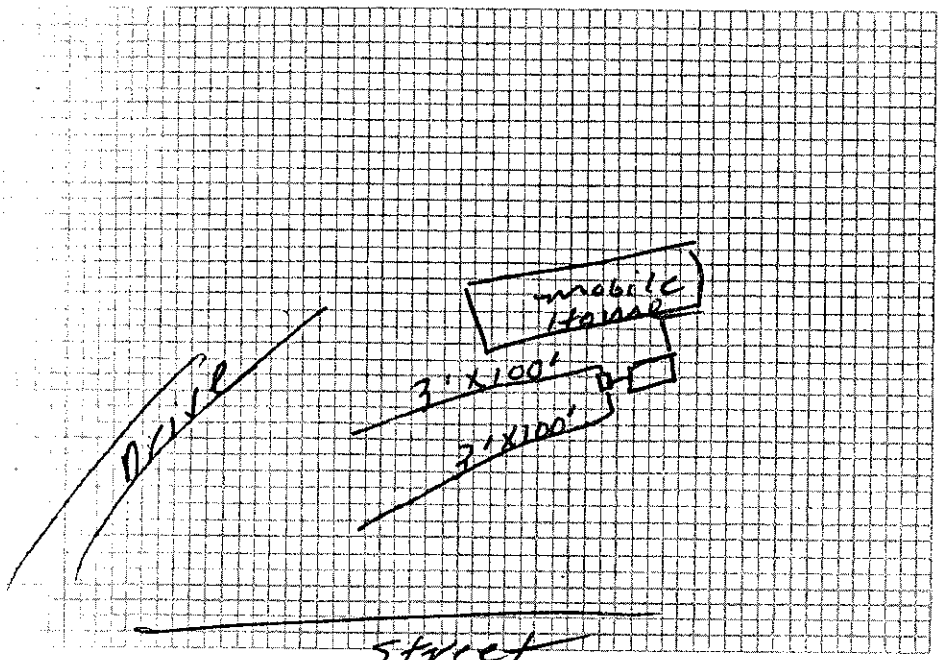
SUBDIVISION NAME Henderson m+p LOT NO. 7 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1/2 acre



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Charlie Moore
Wilkesboro, N.C.

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 7-27-79

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