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 Gene Mittal DATE 5-13-76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70 E.

S. R. No. 70 E

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

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

No. Bedrooms _____ No. Bathrooms 2+

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area _____

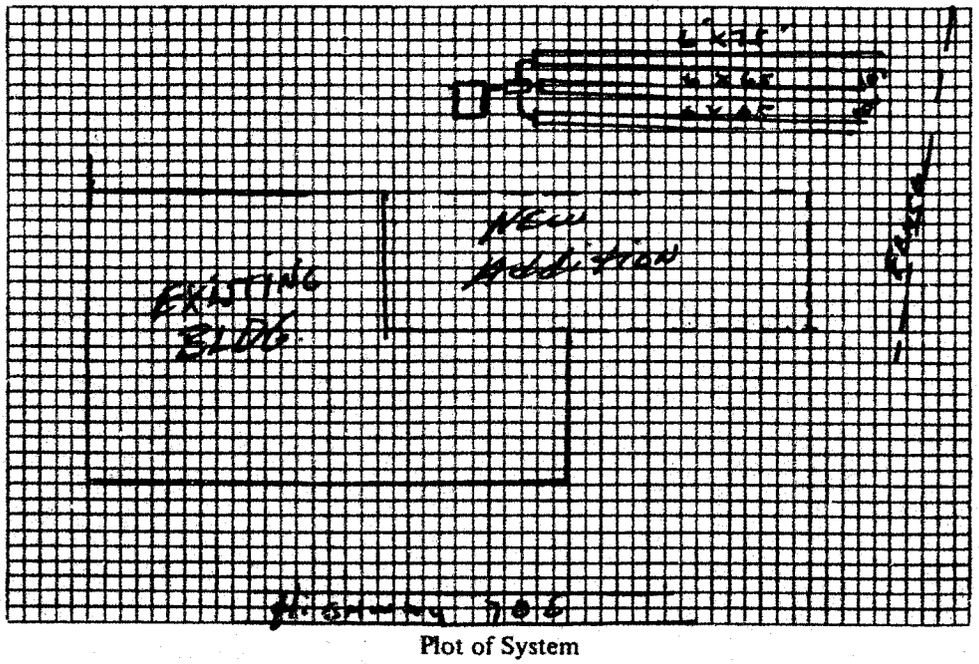
Character & Porosity of Soil Red Clay

Percolation Rate 6'-6c min

Topography Slope to back

Depth to Water Table 8ft

Rock or other impervious formations None



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 6

Sq. Ft 1230 Linear Ft. 410

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by Henry Stegall

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 5/13/76

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