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 Clay Campbell DATE 12-5-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70 E. on Rd #2354 to Gle of Mike - Mobile Home on Left. S. R. No. 2354

SUBDIVISION NAME _____ LOT NO. 6 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 3/4 Acre

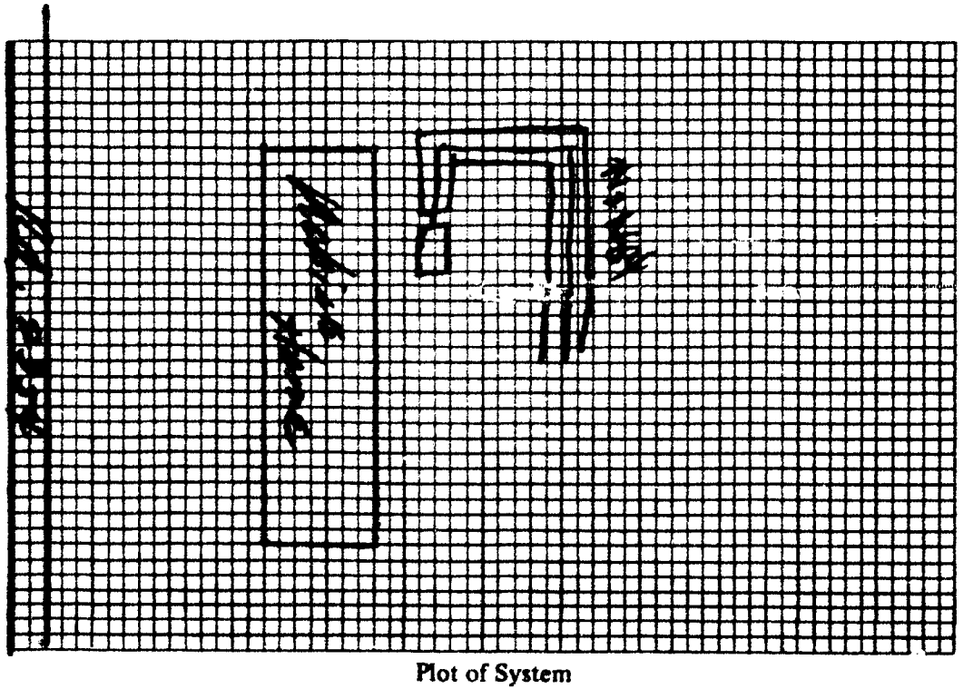
Character & Porosity of Soil Red Clay

Percolation Rate 1

Topography Slope to back.

Depth to Water Table _____

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 625 Linear Ft. 25'-0

Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)

Installed by Elkin County

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 12/5/74

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