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 DAN METZLER DATE 5-5-81 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Suburban Acres - Sec II Tract 3
Bldg III, Apt A. S. R. No. _____

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

House (Apt.) Mobile Home ( ) Business ( ) Other _____

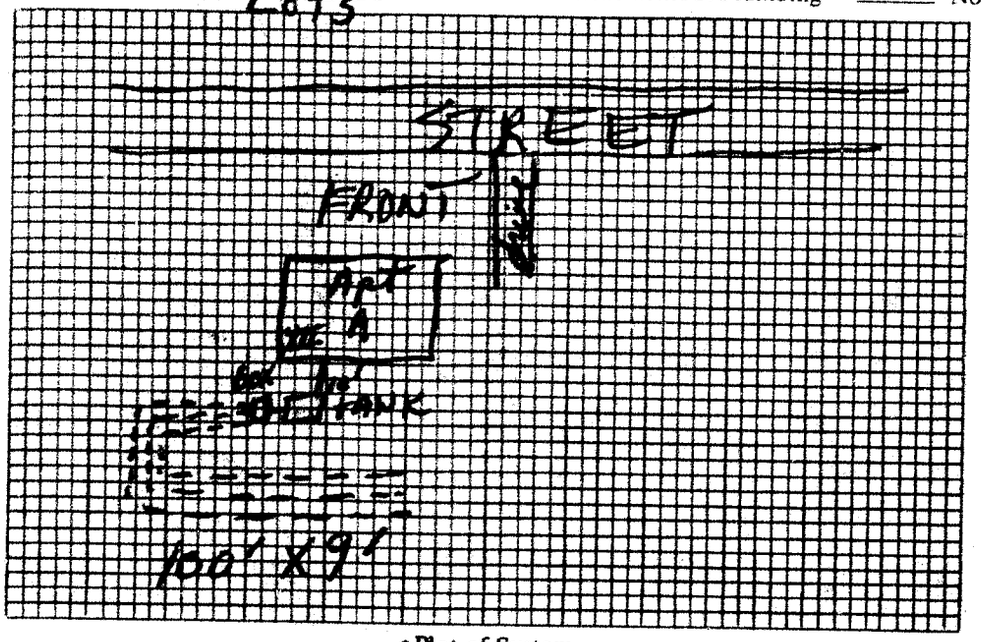
No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)
Auto. Dishwasher Yes ( ) No (✓)
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Lot Area 15,000 sq. ft.

Character & Porosity of Soil Red clay
Percolation Rate 5 mpi / 30 min
Topography 2-6% sloped
Depth to Water Table 10'+
Rock or other impervious formations none observed

_____ Basement with Plumbing Lots 5 _____ Basement without Plumbing Lot 6 _____ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Robert Hoke

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steve Brown DATE 5-5-81

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold