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 Wayland Reynolds DATE 5-11-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 7.0 E Turn into Suburban Acres
beside community well S. R. No. _____

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

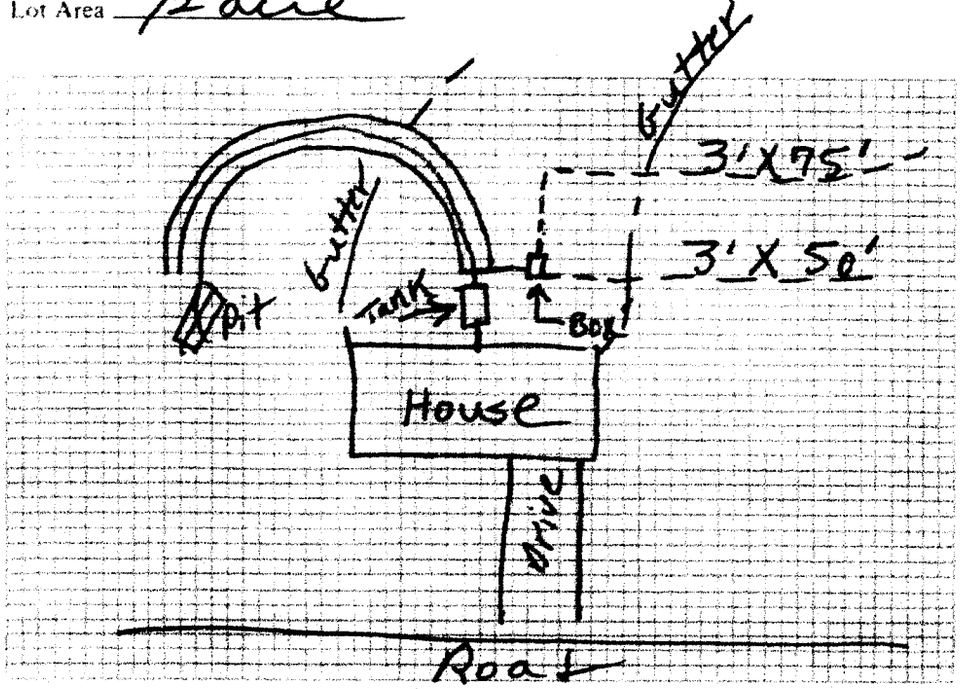
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 1/2 acre

Character & Porosity of Soil Appling Clay
Percolation Rate 120 min/inch
Topography 2 to 4 %
Depth to Water Table 10'+
Rock or other impervious formations None



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 375 Linear Ft. 125
Depth of Stone in Lines 10"
Water Supply: Individual ( )
Public (✓)
16 Ton Pit

Installed by Hoke Septic Tank

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: Pipe Gutters to area below lines as drawn. Landscape so water will not stand over Tank or lines.

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 5-11-79

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