Ronnie Dillard 203893

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 J.E. Billings DATE 6-1-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70 E TR on Shiloh Ch. Rd 1¼ mi on Right - Just before 3rd Creek

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____ S. R. No. _____

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

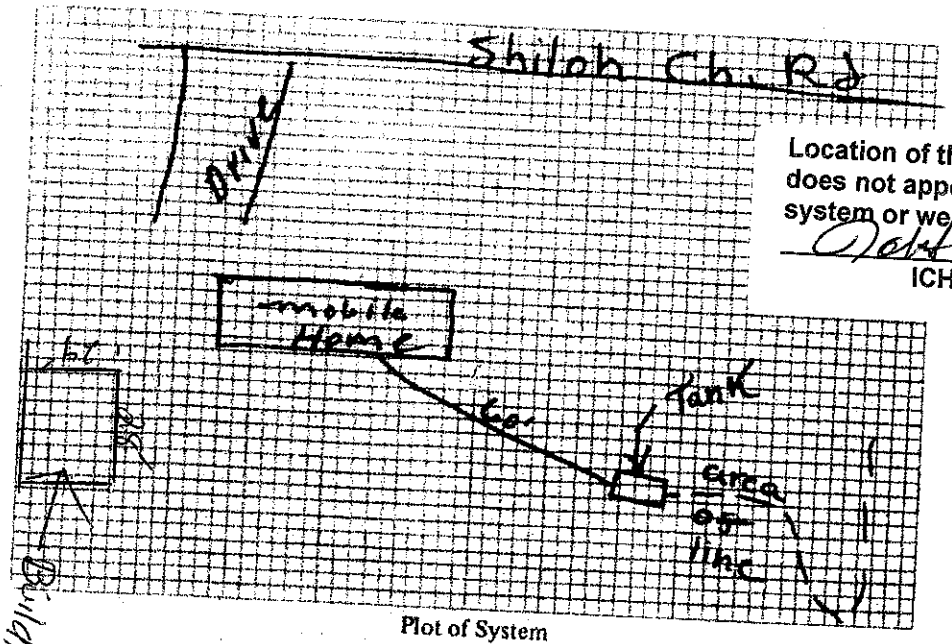
No. Bedrooms 2 No. Bathrooms 1

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

Lot Area acreage

Character & Porosity of Soil _____
Percolation Rate _____
Topography _____
Depth to Water Table _____
Rock or other impervious formations _____

Existing System



Plot of System

Size of Tank _____ Gals.
Nitrification Field:
No. of Lines _____

Location of the proposed 24'x28' Building addition does not appear to impact the existing on-site septic system or well. **NOTE:

[signature] REHS Date: 6/12/14
ICHD-Environmental Health Division

Installed by _____

IMPROVEMENTS PERMIT BY [signature]

COMMENTS: System was working properly at time of inspection.

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 6-1-79

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