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 Dennis Aitken DATE 12-7-77 PERMIT NO. _____

PHONE: Business _____ Home _____

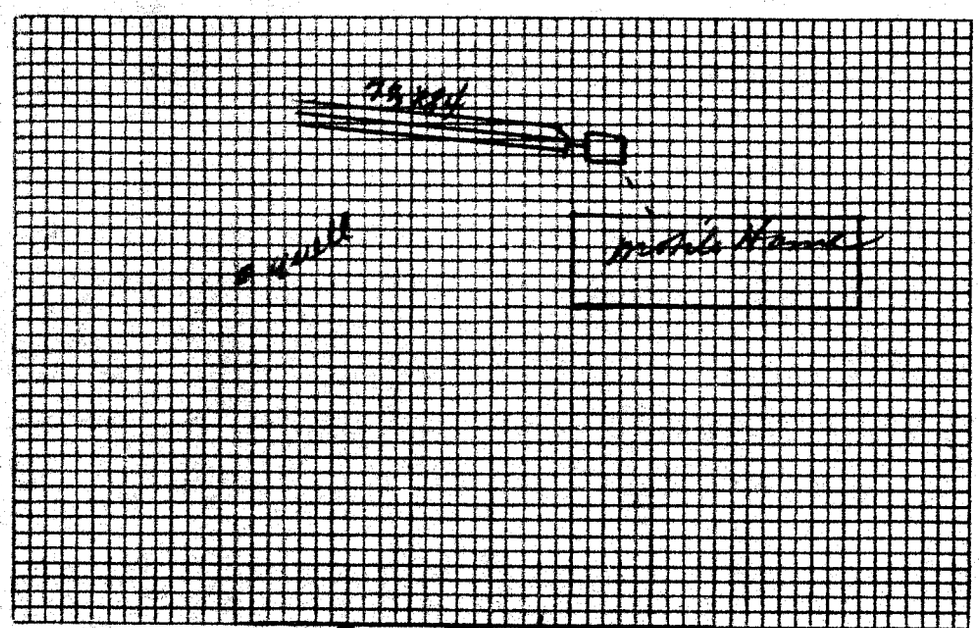
LOCATION 70 E TR on Rd #2318. 1st Mobile Home on left in woods S. R. No. _____

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

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	ASa
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	Fast
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-6% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4ft
Lot Area _____			Rock or other impervious formations	None



RO Model System 318

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Sammy Rains

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 12/7/77

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