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 Walter Coffey DATE 12-15-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1941 Hay St.

SUBDIVISION NAME _____ S. R. No. _____

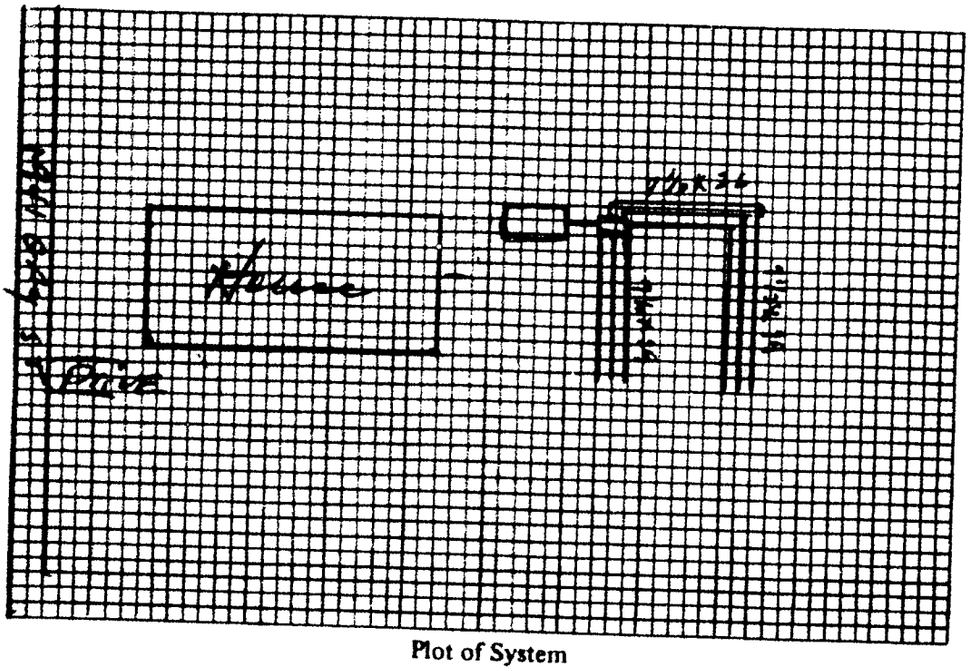
LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sandy clay
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	60
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slope to front
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	25'
			Rock or other impervious formations	None

Lot Area Small



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 6
Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)

Installed by Hale Septic Tank Service

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Ford Jr. DATE 12/15/75

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