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 Moore DATE 4-2-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Murdock Rd TR after Belmont PK Cemetary on Sterling St. No. 1211 S. R. No. _____

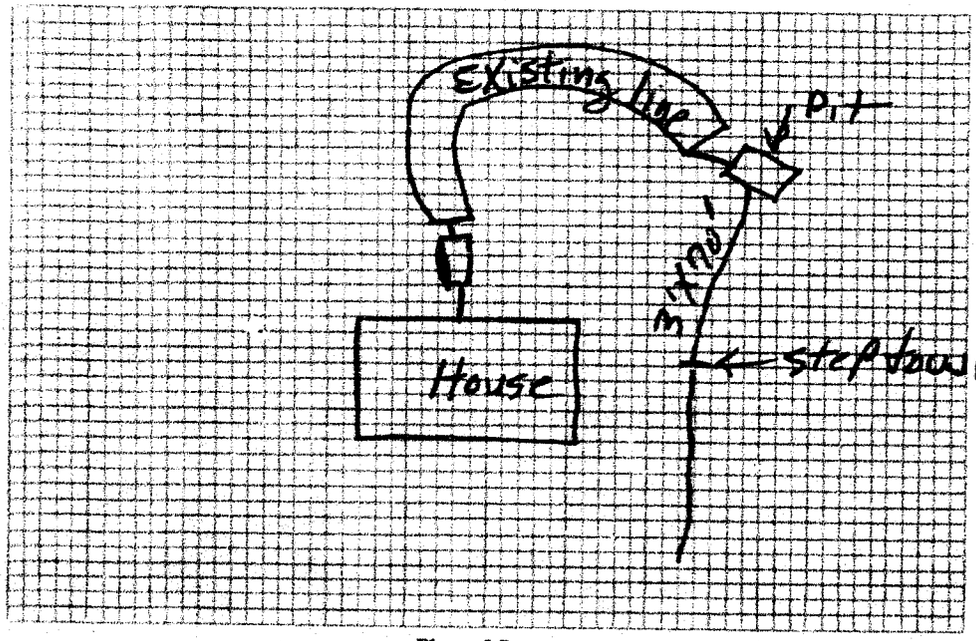
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Appling clay
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	120 min/inch
Auto. Wash. Machine	Yes ( )	No ( )	Topography	2 to 6% Slope
Site Suitable	Yes ( )	No ( )	Depth to Water Table	10'+
			Rock or other impervious formations	None

Lot Area _____



Plot of System

Size of Tank Existing gals.
Nitrification Field:
No. of Lines 1 + 10 Ton Pit
Sq. Ft. 210 Linear Ft. 70
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by William Culbertson

IMPROVEMENTS PERMIT BY D. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D. C. Moore DATE 4-2-79

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