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 Fred Bost DATE 8/16/79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 330 Walton Dr (Delwar Heights)

S. R. No. _____

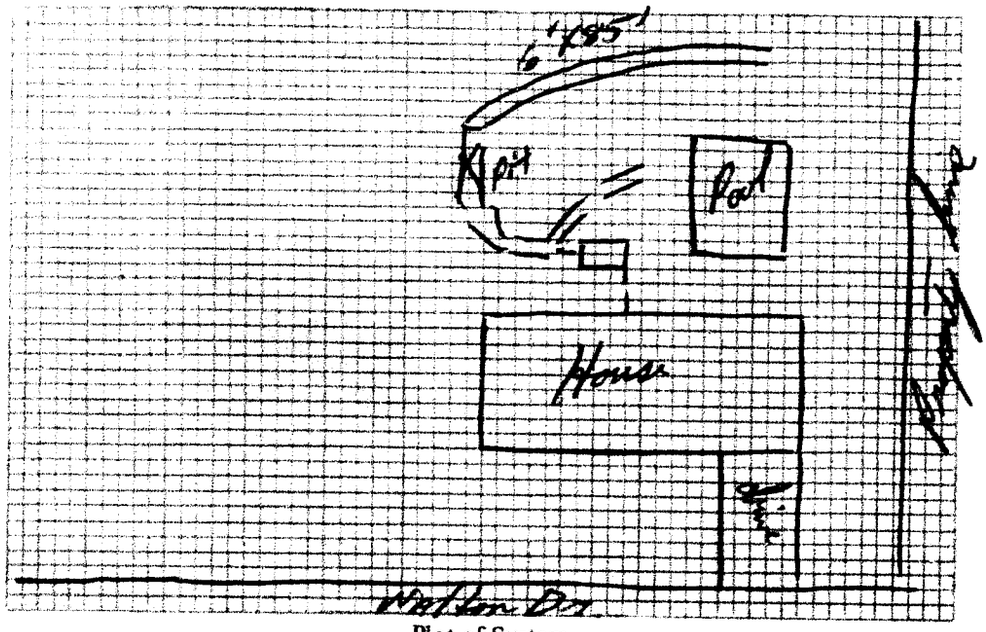
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Character & Porosity of Soil	Red Clay
Auto. Dishwasher	Yes ( )	No ( )	Percolation Rate	120 min/inch
Auto. Wash. Machine	Yes ( )	No ( )	Topography	2-6%
Site Suitable	Yes ( )	No ( )	Depth to Water Table	10'+
			Rock or other impervious formations	rock

Lot Area _____



Plot of System

Size of Tank existing Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 340 Linear Ft. 170
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Iredell County

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: Land slope so water will not stand over tank or line

CERTIFICATE OF COMPLETION BY Andrew E. Casey DATE 8/16/79

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