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 A. D. Lindsay DATE 2 Dec 76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Mundale Rd. - T.R. on Harvey St. to Ebony Acres - Ebony Circle.

S. R. No. _____

SUBDIVISION NAME _____ LOT NO. #9 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 100 x 200

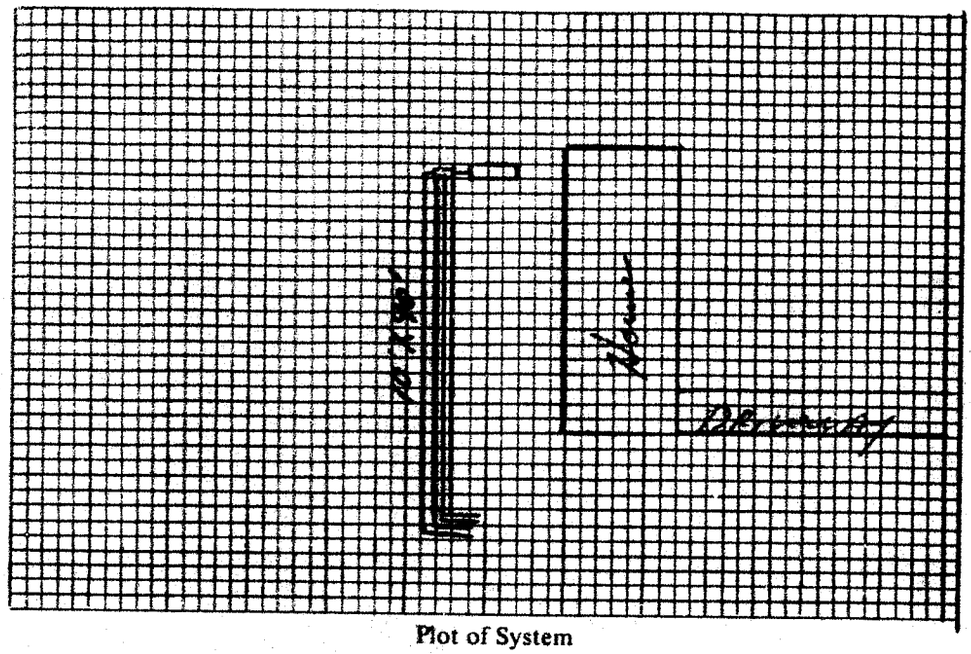
Character & Porosity of Soil Cc B3

Percolation Rate slow

Topography 2-6% Slope

Depth to Water Table 48"

Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 10"

Water Supply: Individual ( )

Public (✓)

Installed by Hooke Lucky

IMPROVEMENTS PERMIT BY _____

COMMENTS: not entered according to Rept.

CERTIFICATE OF COMPLETION BY W. M. Howard DATE 2 Dec 76

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