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 K & H Const. Co. DATE 7-18-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Florence Circle

S. R. No. _____

SUBDIVISION NAME Mitchell Acres LOT NO. 47 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 2½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area ½ Acre

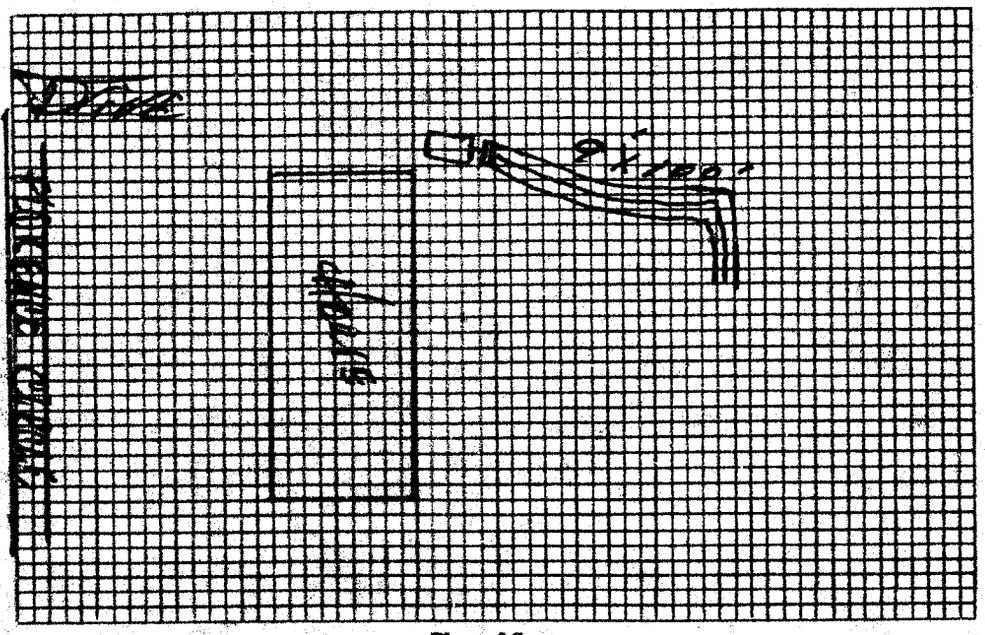
Character & Porosity of Soil LFSL

Percolation Rate 2 mpi

Topography 6-10 Slope

Depth to Water Table none

Rock or other impervious formations none



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 700 Linear Ft. 300

Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)

Installed by [illegible]

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [signature] DATE 7/18/77

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