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 Dr. David Parks DATE 6-6-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Eastbrook Subdivision – Heritage Circle

S. R. No. _____

SUBDIVISION NAME _____ LOT NO. # 46 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 3½

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 27,800 sq'

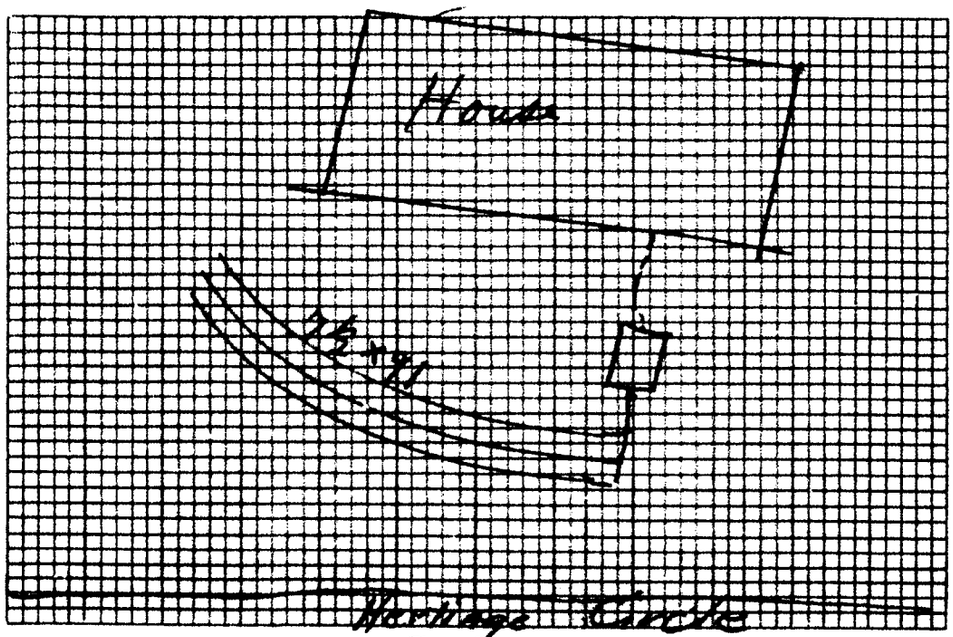
Character & Porosity of Soil Red Clay

Percolation Rate mm

Topography Slop

Depth to Water Table ∞

Rock or other impervious formations ∞



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 682 Linear Ft. 273
Depth of Stone in Lines 16"

Water Supply: Individual ( )
Public (✓)

Installed by Raymond Adams

IMPROVEMENTS PERMIT BY _____

COMMENTS: Good system; Due to an impervious formation, 91 feet were obtained

CERTIFICATE OF COMPLETION BY Andrew E. Causey DATE 6-6-74

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