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 J. B. Goff DATE 6-7-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Out E. Broad EXT. T.R. on #2426 - T.R. on #2464 House on L. S. R. No. _____

SUBDIVISION NAME Statesville Country Club LOT NO. 45 SECTION OR BLOCK NO. _____

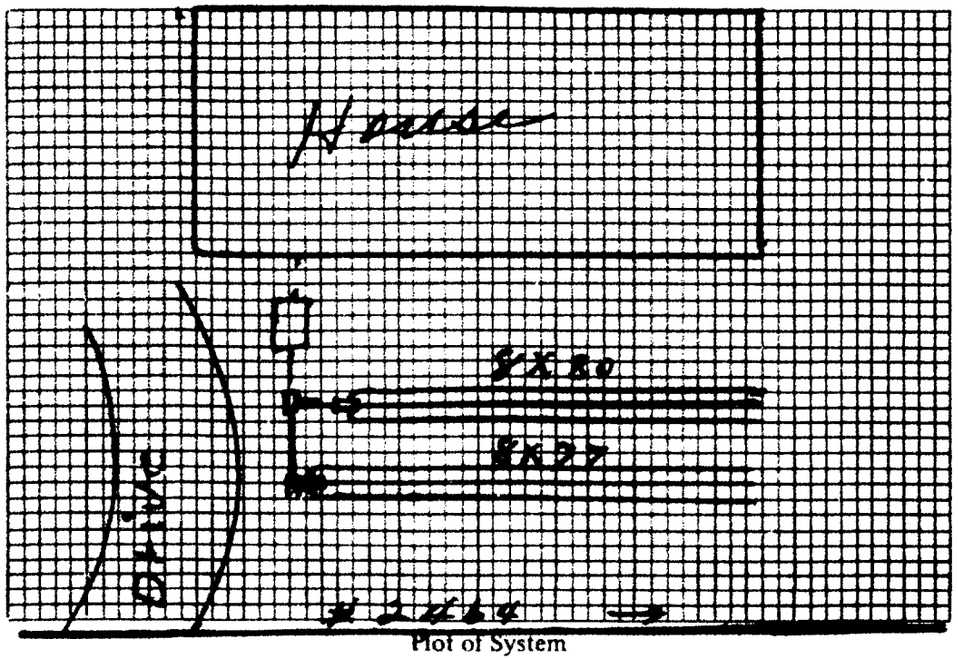
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area 20,000 Sq ft

Character & Porosity of Soil Red Clay
Percolation Rate _____
Topography Slope to front
Depth to Water Table Low
Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 6
Sq. Ft. 1256 Linear Ft. 471
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Hale Septic Tank Co.

IMPROVEMENTS PERMIT BY W. M. Howard

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 6-7-75

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