IREDELL COUNTY HEALTH DEPARTMENT

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(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System — G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Alfred Levan DATE 5-1-79 PERMIT NO. ____

PHONE: Business ____ Home ____

LOCATION 21 N TR on 2171

SUBDIVISION NAME Meadow View LOT NO. 52 S. R. No. ____ SECTION OR BLOCK NO. II

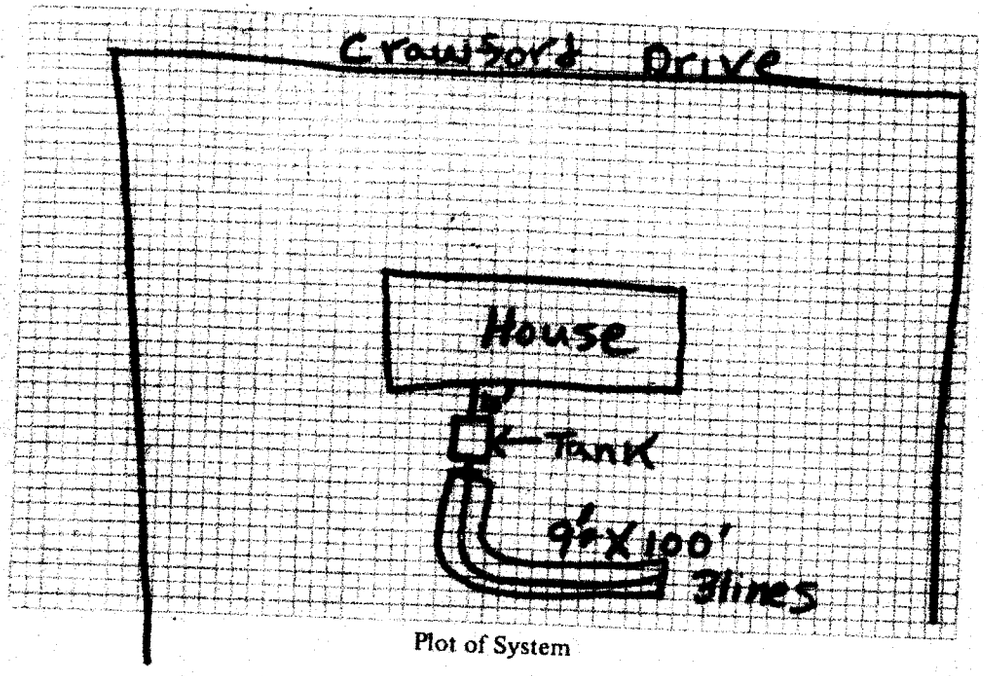
House (✓) Mobile Home ( ) Business ( ) Other ____

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 15,000 sq. ft.

Character & Porosity of Soil CsBa + Appling clay
Percolation Rate 12 min/inch
Topography 2 to 6% slope
Depth to Water Table 10'+
Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Don Lackey

IMPROVEMENTS PERMIT BY Glenn Fox

COMMENTS: ____

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 5-1-79

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