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 Hake Pratt DATE 5-10-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N. TR on Rd # 2171

S. R. No. _____

SUBDIVISION NAME Meadowview Estates LOT NO. 17 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

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

Lot Area 150 x 200 Approx

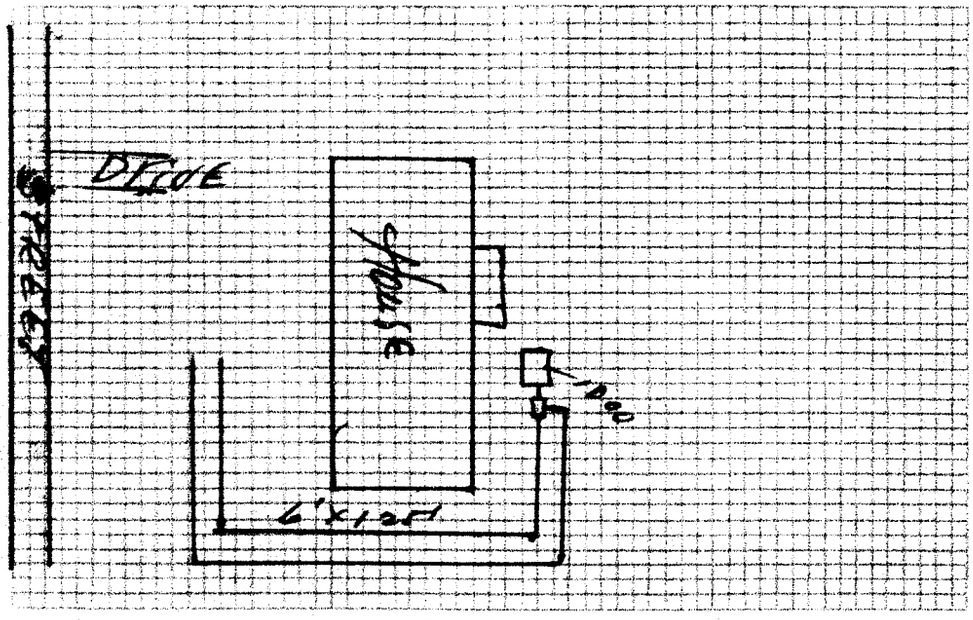
Character & Porosity of Soil Cecil Clay

Percolation Rate good

Topography 2-6% Slope

Depth to Water Table deep

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 16"

Water Supply: Individual ( )

Public (✓)

Installed by Wells Septic Tank Serv.

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 5/10/78

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