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 Jeff Horne DATE 4-27-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N TR on 2171 To Meadowview Estate

S. R. No. _____

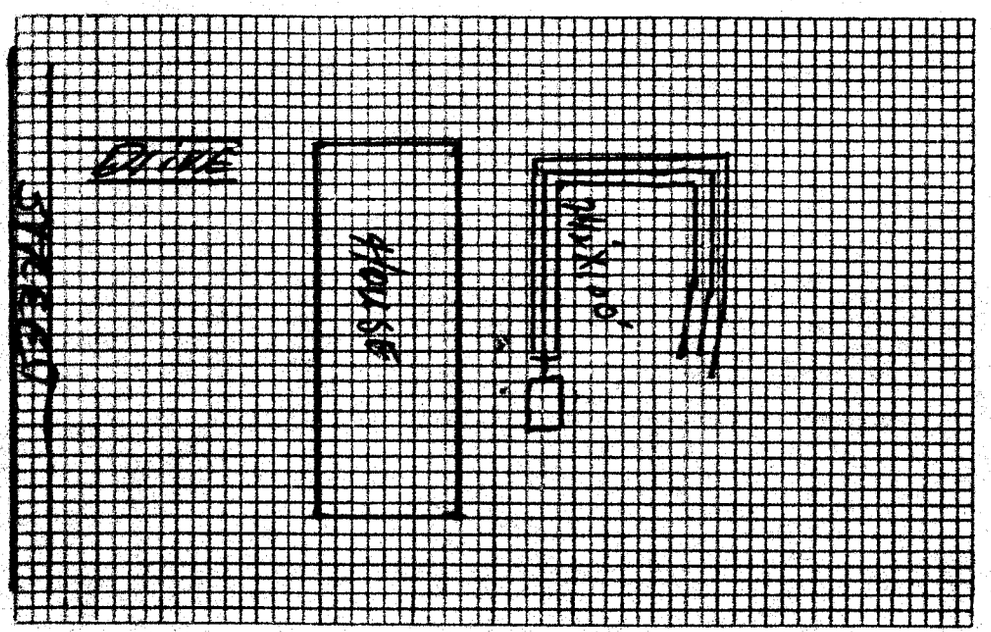
SUBDIVISION NAME Meadow View Estate #2 LOT NO. 58 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	Good
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Rolling Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Unk
			Rock or other impervious formations	None

Lot Area 100 X 200



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 150 Linear Ft. 300
Depth of Stone in Lines 18"

Water Supply: Individual ( )
Public (✓)

Installed by Donald Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Ellen Fox Jr. DATE 4/27/77

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