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 Williams Builders DATE 7-14-80 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION US 21 N TR on Dunlap Gate Rd [redacted] TL on Dunlap Gate circle 6th lot on R S. R. No. _____

SUBDIVISION NAME Dunlap Gate LOT NO. 39 SECTION OR BLOCK NO. _____

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

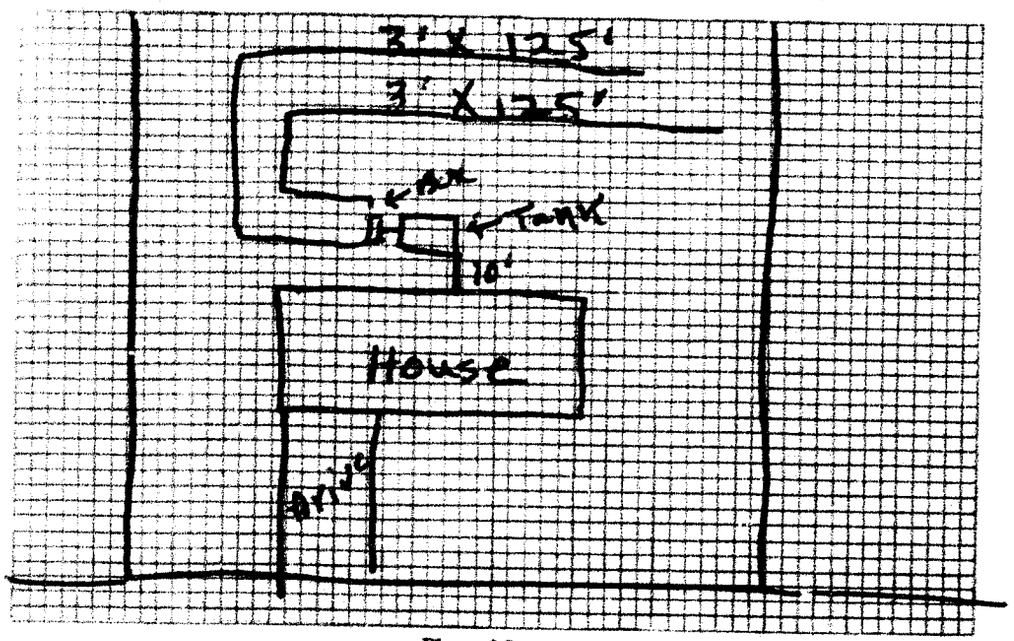
No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Percolation Rate	60 to 80 min per
Auto. Dishwasher	Yes ( )	No (✓)	Topography	2 to 6 %
Auto. Wash. Machine	Yes (✓)	No ( )	Depth to Water Table	10'+
Site Suitable	Yes (✓)	No ( )	Rock or other impervious formations	None

Character & Porosity of Soil Cecil Fine Sandy Clay ✓

Lot Area 17,000 Sq. Ft.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



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 10"

Water Supply: Individual ( )
Public (✓)

Installed by Hope Brothers

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY R. C. Moore

COMMENTS: landscape & Pipe Gutters so that surface water will not stand over Tank or lines.

CERTIFICATE OF COMPLETION BY R. C. Moore DATE 7-14-80

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold