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~~ JAMES ELDER DATE 10-15-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION HIGHWAY 70 E - RIGHT ON Rd - 2359 - THEN LEFT ON Rd. 2360 - 60 / MILE TRAILER ON LEFT S. R. No 2360

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

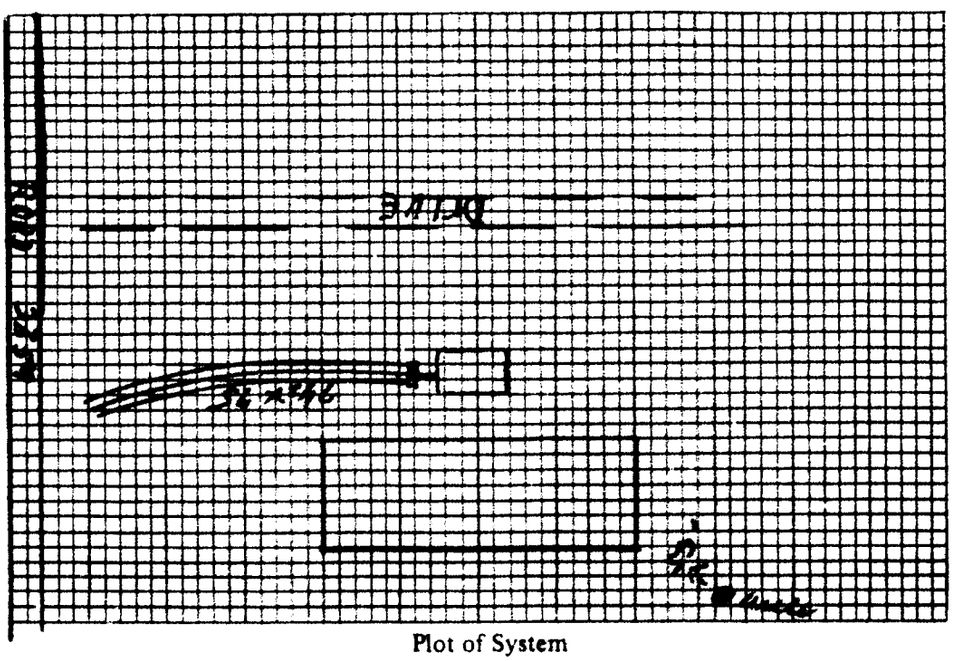
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil _____
Percolation Rate _____
Topography SLIGHT Slope to front
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area _____



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 562½ Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Robert Hicks & R.E. Foy
Statesville, NC

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Steven Foy Jr. DATE 10-15-73

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