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 John Eisele DATE 11-16-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION St. Andrews Rd

S. R. No. _____

SUBDIVISION NAME Shannon Acres LOT NO. 364 SECTION OR BLOCK NO. _____

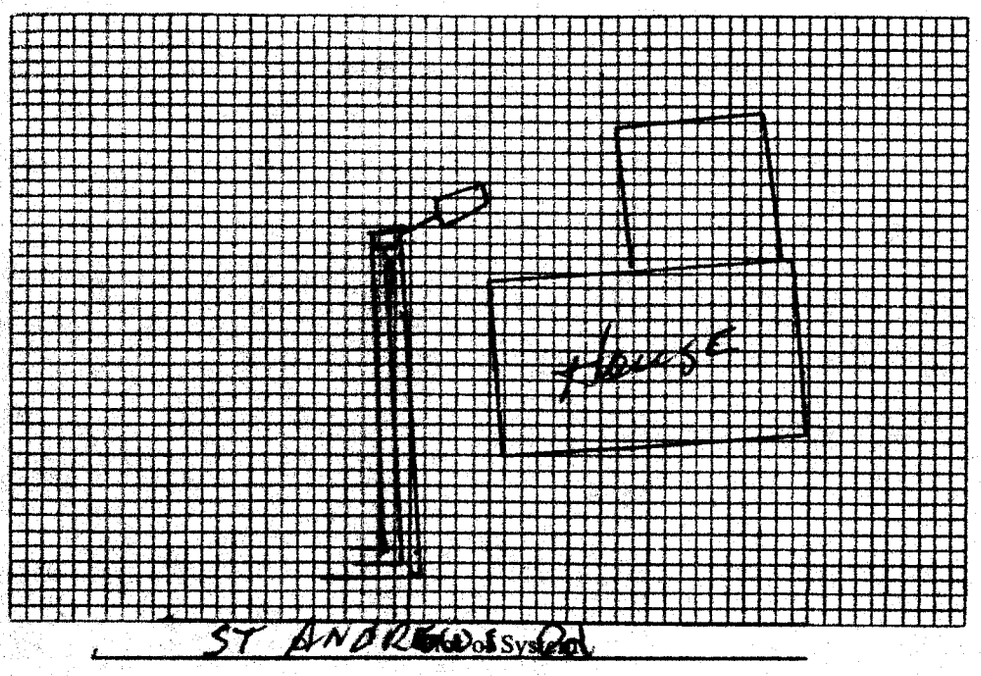
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 3

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

Lot Area _____

Character & Porosity of Soil Cecil
Percolation Rate 5 Min. Mod
Topography 2-6% Slope
Depth to Water Table 4 ft
Rock or other impervious formations None



Side of System

Size of Tank 1256 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 990 Linear Ft. 330
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by Hobbs Septic Tank Service

IMPROVEMENTS PERMIT BY _____

COMMENTS: Water seeps in drainfield, bad soil - Contractor and owner aware of this condition - care should be taken as to water usage.

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 11/16/77

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