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 Louis Ortuno DATE 25 June 74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Statesville Country Club
Lot # 340 & 341 S. R. No. _____

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

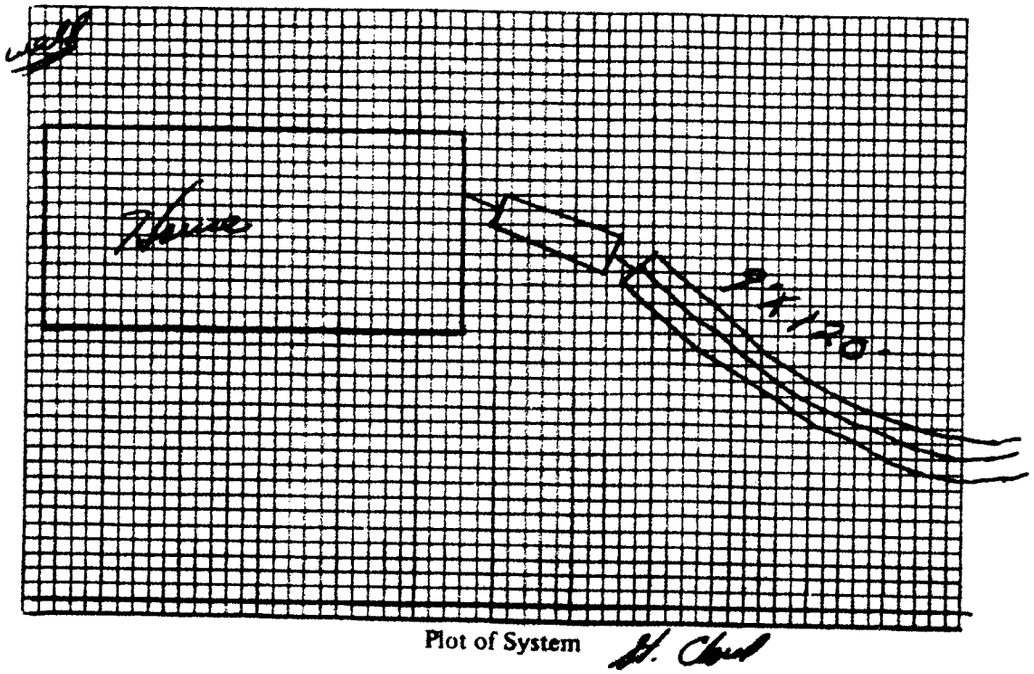
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 4

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

Lot Area 36,320 sqft plus Bf 341

Character & Porosity of Soil Red Clay Loam
Percolation Rate 60
Topography Slight Slope to Moderate Slope
Depth to Water Table _____
Rock or other impervious formations _____



Plot of System H. Chad

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 18"
Water Supply: Individual (✓)
Public ( )

Installed by Henry Lyons

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY William M. Thrust DATE 25 Jun 74

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