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 Anderson Sherrill DATE April 20, '78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION St. Cloud Dr.

S. R. No. _____

SUBDIVISION NAME Shannon Acres LOT NO. 266 SECTION OR BLOCK NO. _____

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

No. Bedrooms 4 No. Bathrooms 2

Garbage Disposal Unit Yes (+) No ( )

Auto. Dishwasher Yes (+) No ( )

Auto. Wash. Machine Yes (+) No ( )

Site Suitable Yes (+) No ( )

Lot Area _____

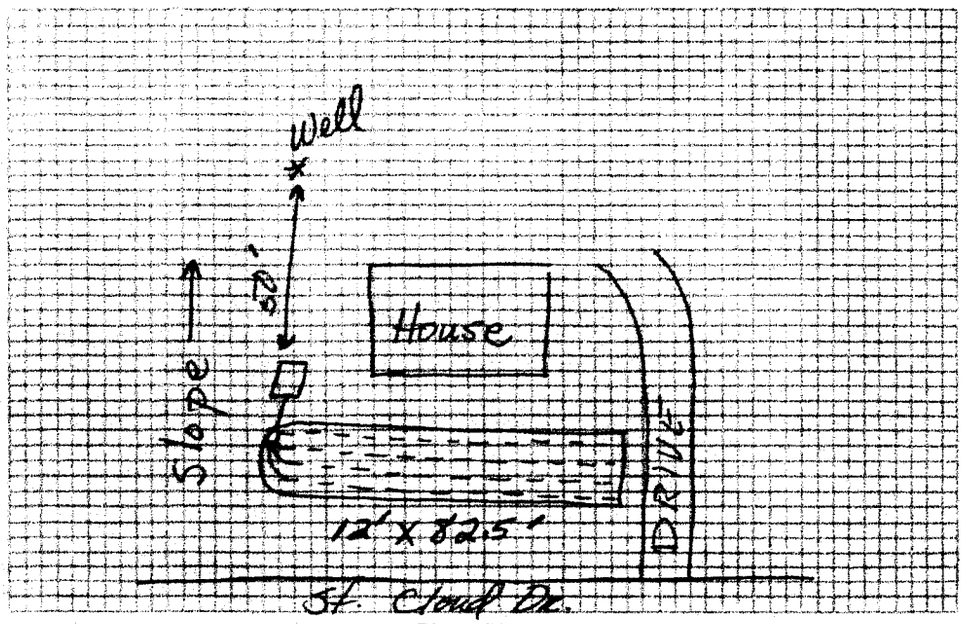
Character & Porosity of Soil Red-yellow clay loam (Porosity fair to poor)

Percolation Rate —

Topography 6-10%

Depth to Water Table sink.

Rock or other impervious formations none obs.



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 990 Linear Ft. 330
Depth of Stone in Lines 16"+

Water Supply: Individual ( )
Public ( )

Installed by Hoke Bros.

IMPROVEMENTS PERMIT BY Glenn Fox Jr

COMMENTS: Nitrification field had to be widened and shortened to stay on property. Septic tank kept very shallow but drainfield was still 5-6'+ deep. Soil was heavily mottled, especially toward end of drainfield.

CERTIFICATE OF COMPLETION BY Harold R. Hanson DATE April 20, '78

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