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 William L. Troye DATE 10-20-77 PERMIT NO. _____

PHONE Business _____ Home _____

LOCATION S/E corner N. Carlson Rd and Piedmont Rd. S. R. No. _____

SUBDIVISION NAME Shannon Acres LOT NO. 120 SECTION OR BLOCK NO. _____

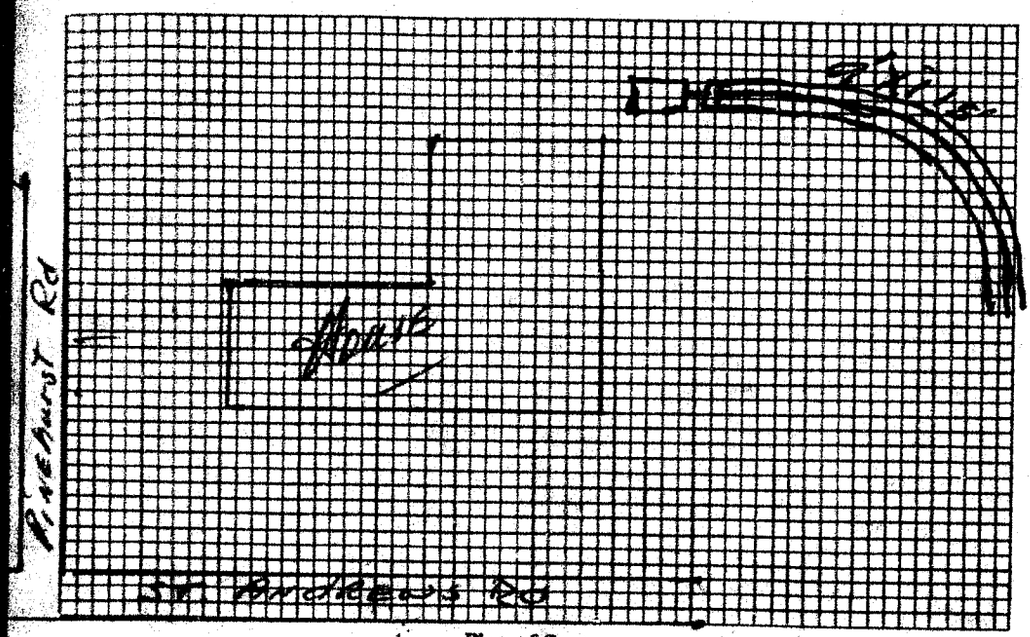
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 3

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

Lot Area 22,340

Character & Porosity of Soil ~~Clay~~ Gail Clay
Percolation Rate ~~60 min~~ 60 Min Low Borings
Topography 2 - 6% Slope
Depth to Water Table Unk
Rock or other impervious formations None



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 366
Depth of Stone in Lines 18"
Water Supply: Individual ( )
Public (✓)

Installed by Hale Septic Tank Serv.

IMPROVEMENTS PERMIT BY _____

COMMENTS: Storm drain from street and downspout + surface water should be diverted away from Septic Tank drainfield

CERTIFICATE OF COMPLETION BY Glenn Foy Jr. DATE 10/20/77

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