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 Elgar Crawford DATE 10-16-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION East Broad St. Left TL into Camelot, Take 1st R 3rd lot on left S. R. No. _____

SUBDIVISION NAME Camelot Acres LOT NO. 53 SECTION OR BLOCK NO. _____

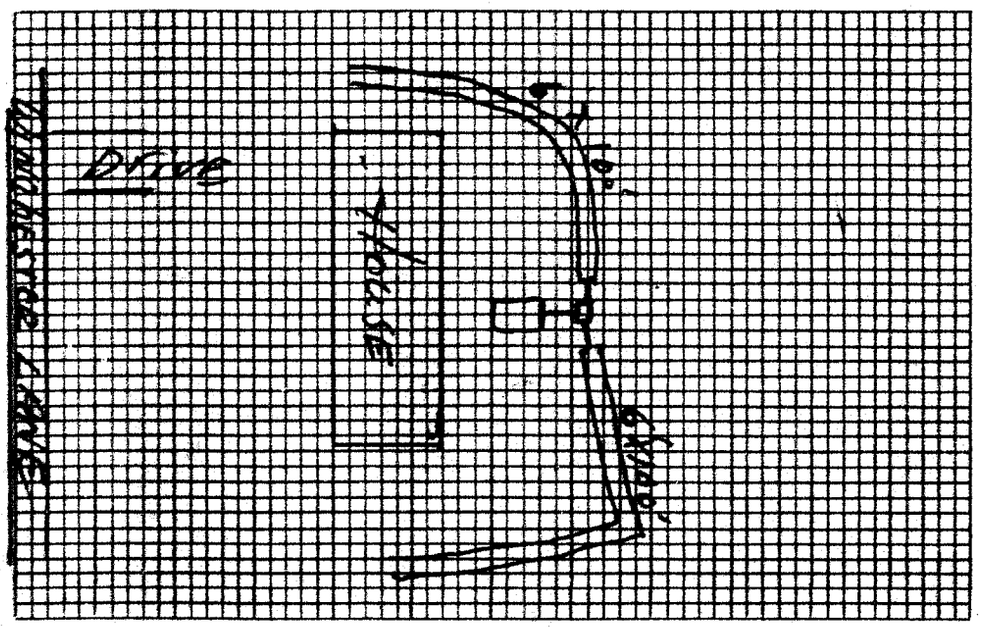
House (✓) Mobile Home ( ) Business ( ) Other _____

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 150 X 120

Character & Porosity of Soil Cecil Clay Loam
Percolation Rate 30 min per inch ave.
Topography 2 - 6%
Depth to Water Table Deep
Rock or other impervious formations None



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1200 Linear Ft. 400
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Carroll Lackey

IMPROVEMENTS PERMIT BY Rollin W Johnson R.S.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Rollin W Johnson R.S. DATE 10-16-79

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