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 Frances Cockerham DATE 10-30-78 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION US 64 East

S. R. N. _____

SUBDIVISION NAME Camalot Acres LOT NO. 76 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes (✓) No ( )

Auto. Dishwasher Yes (✓) No ( )

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 112X179

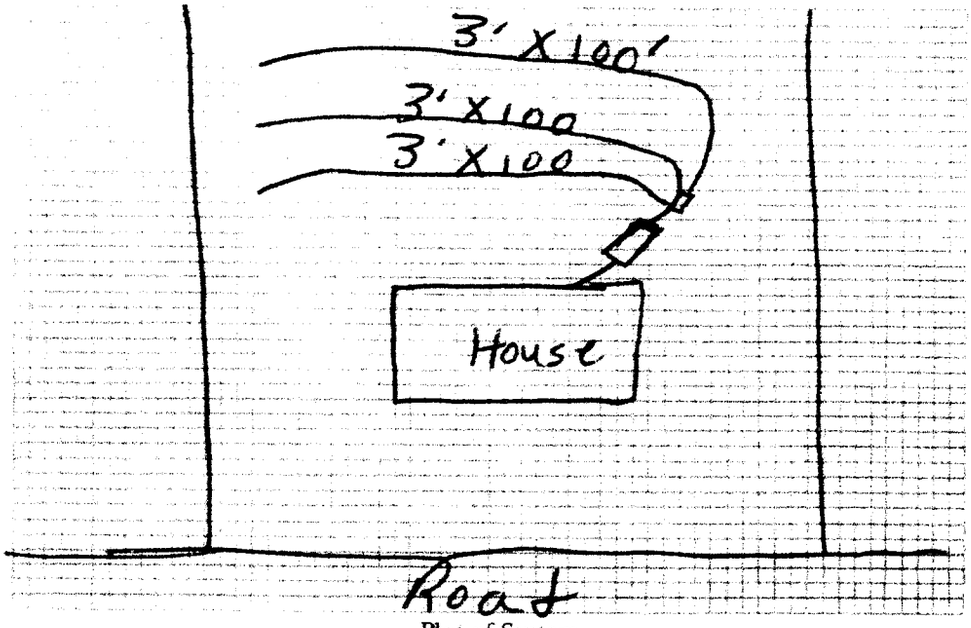
Character & Porosity of Soil Cecil Clay loam

Percolation Rate 90 min/inch

Topography 2 to 4% Slope

Depth to Water Table 10'+

Rock or other impervious formations none



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 10"

Water Supply: Individual ( )
Public (✓)

Installed by Hoke Septic Tank Co.

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS Divert all Gutter water & surface water around System.

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 10-30-78

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