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 Allen Sharpe DATE 11-17-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E Behind Coal Springs Fire Dept.

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. Back Property SECTION OR BLOCK NO. _____

House (✓) Mobile Home ( ) Business ( ) Other _____ Rec. Institute

No. Bedrooms 2 No. Bathrooms 1 1/2

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

Lot Area 2 Acres

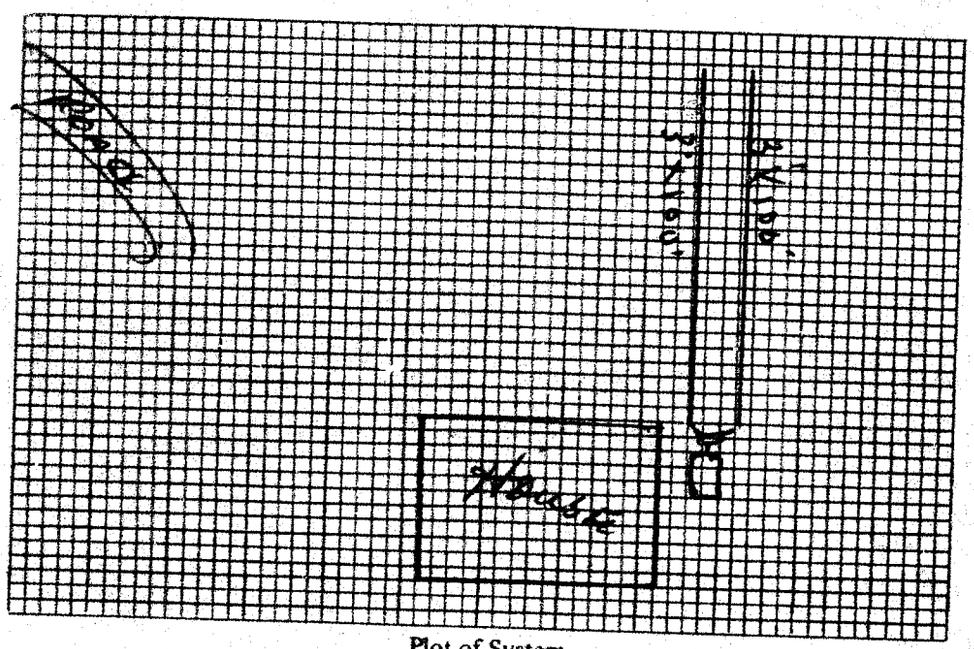
Character & Porosity of Soil CCES

Percolation Rate Slo-Mod

Topography 6-10% Slope

Depth to Water Table sink

Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 200

Depth of Stone in Lines 10"

Water Supply: Individual (✓)

Public ( )

Installed by Donald Lackey

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Allen Sharpe DATE 11/17/77

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