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 Daniel + Gerard Morin DATE 1-10-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E TL on Riverhill Rd 1/2 mi TR

S. R. No. _____

SUBDIVISION NAME East Iredell M H P LOT NO. 30 + 31 SECTION OR BLOCK NO. _____

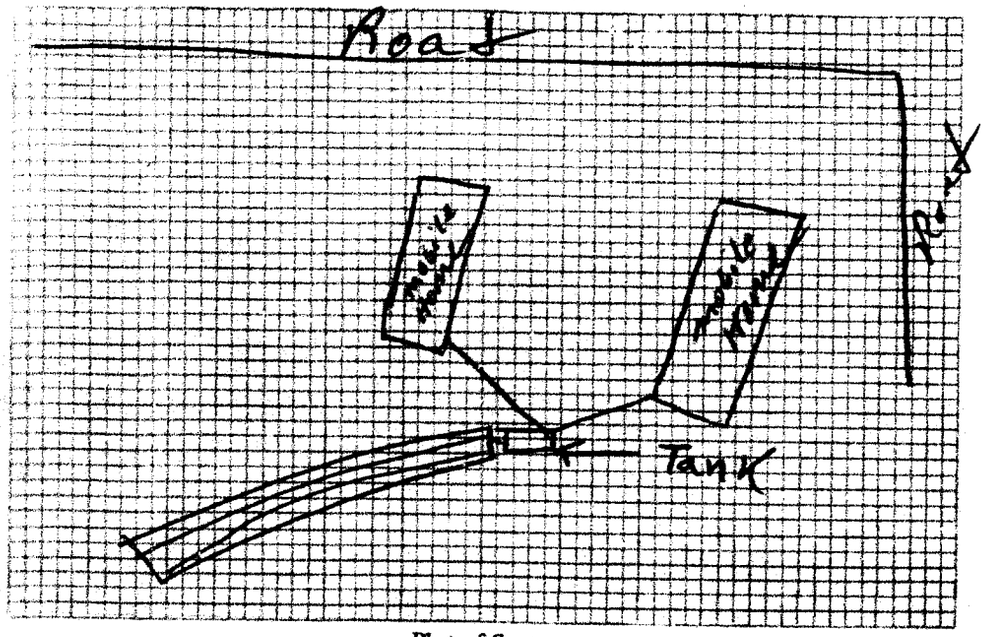
House ( ) Mobile Home ( ) Business ( ) Other 2 Mobile Homes (14X60 2 bedroom) (12X52 2 Bedroom)

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area 1/2 acre

Character & Porosity of Soil _____
Percolation Rate _____
Topography _____
Depth to Water Table Existing
Rock or other impervious formations _____



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1000 Linear Ft. 400
Depth of Stone in Lines 10
Water Supply: Individual ( )
Public (✓)

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: This certificate can be approved for both mobile Homes since they will both use same system.

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 1-10-79

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