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 Lunge Henchon DATE 23 oct 75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21N- 1st driveway on right after passing Chumbin Tabernacle (2156) just before Sadell Limited at Summerbury S. R. No. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

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

Character & Porosity of Soil Cecil Clay

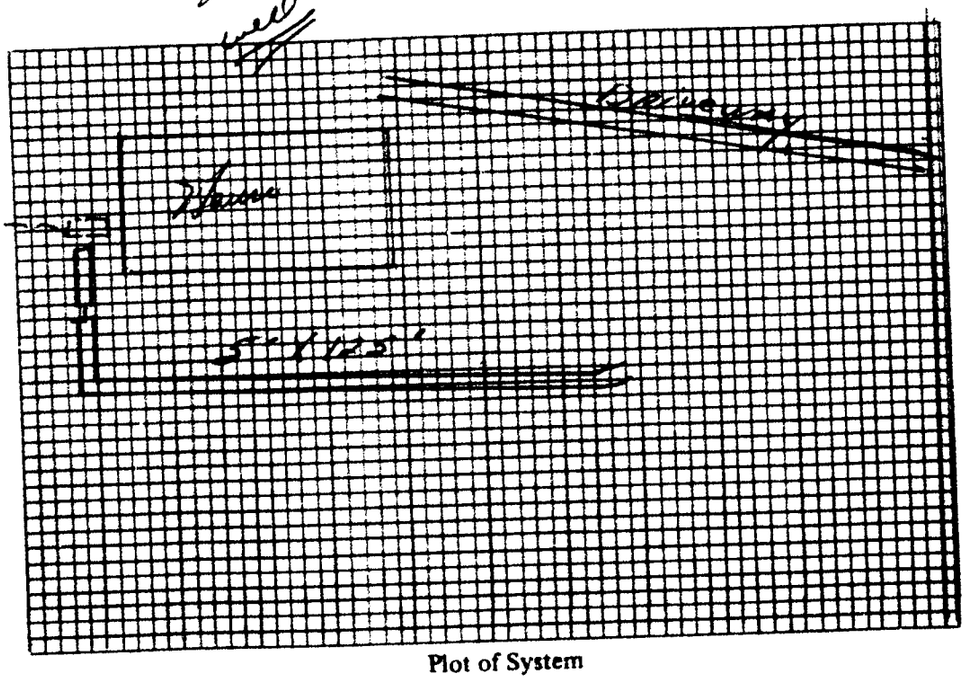
Percolation Rate slow

Topography slight slope

Depth to Water Table ok

Rock or other impervious formations ok

Lot Area acreage



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by Ky Lentz

IMPROVEMENTS PERMIT BY _____

COMMENTS: well septic tank syste for existing home

CERTIFICATE OF COMPLETION BY wm Tshaud DATE 23 oct 75

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