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 Hayden Hendrix DATE 9-12-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E. Tl on RD 2177 - to Salem Park

SUBDIVISION NAME Salem Park S. R. No. _____

LOT NO. 32 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 100 X 200

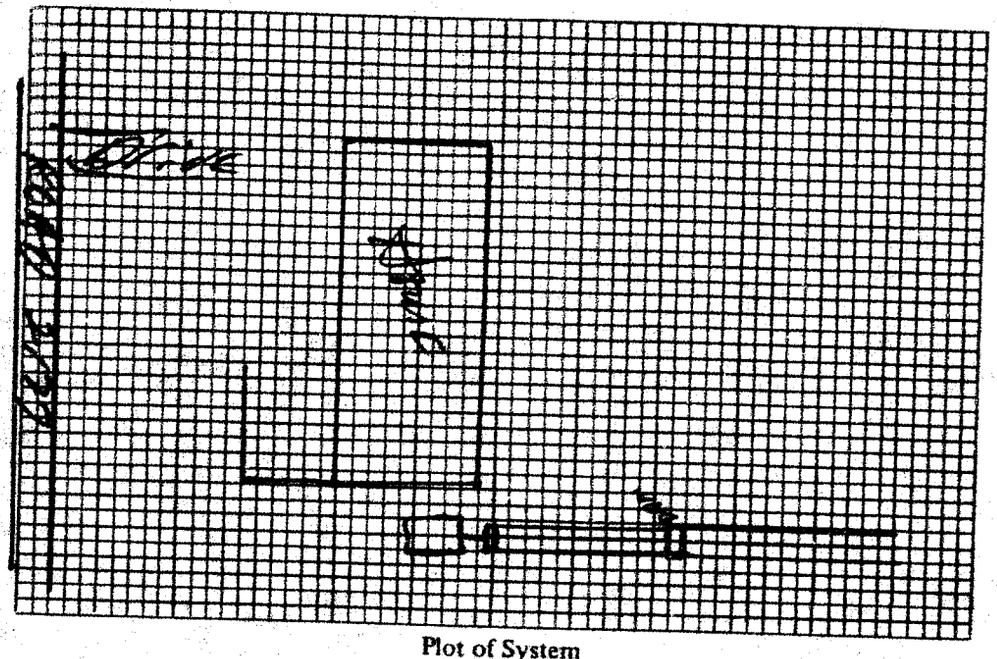
Character & Porosity of Soil C Fsz

Percolation Rate _____

Topography G - 10% Slope

Depth to Water Table _____

Rock or other impervious formations _____



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 621 Linear Ft. 250

Depth of Stone in Lines 18"

Water Supply: Individual ( )

Public (✓)

Installed by Eddie Smith & Son

IMPROVEMENTS PERMIT BY _____

COMMENTS: 4" Clay pipe 250. 34 ft. at bottom

CERTIFICATE OF COMPLETION BY _____ DATE 9/12/77

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