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 Robert Thorneburg DATE 10-26-78 PERMIT NO. _____

PHONE Business _____ Home _____

LOCATION 64 E TL on 2177

S. R. No. _____

SUBDIVISION NAME Foxcreek LOT NO. 27 SECTION OR BLOCK NO. _____

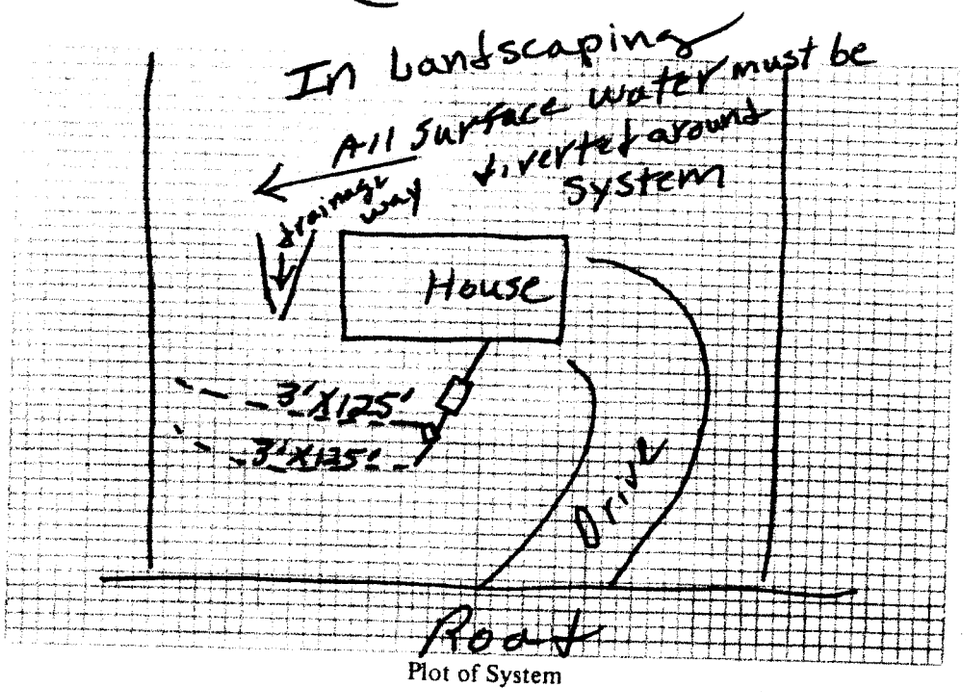
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 2½

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

Lot Area over 1 acre

Character & Porosity of Soil CfC2 Cecil clay
Percolation Rate 60 min/inch
Topography 2 to 6 % slope
Depth to Water Table 10'+
Rock or other impervious formations none



Plot of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by [redacted] Hoke Septic Tank Co.

IMPROVEMENTS PERMIT BY F.C. Moore

COMMENTS: System was originally laid out in back however stub out was 3' + below Ground level so went to front but had less area to install so compensated with 16" of Stone

CERTIFICATE OF COMPLETION BY _____ DATE _____

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