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 Melvin Barr DATE 6-15-79 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64E TL on new Salem Road on right Stay right 1/4mi on left S. R. No. _____

SUBDIVISION NAME Fox Creek LOT NO. 29 SECTION OR BLOCK NO. _____

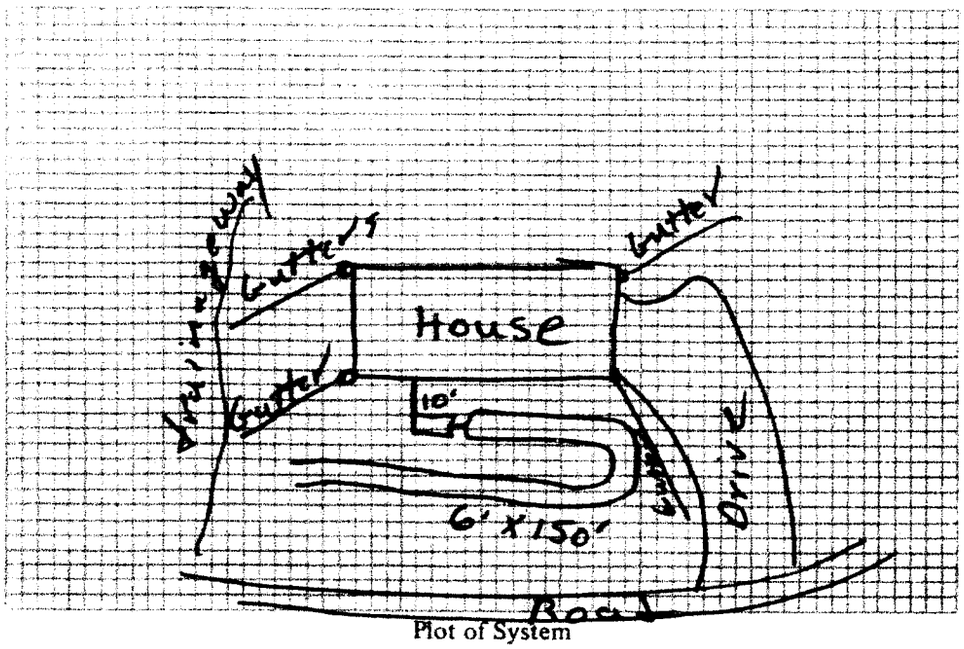
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 2 1/2

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

Lot Area 1 acre

Character & Porosity of Soil Cecil gravely clay
Percolation Rate 45 min / inch
Topography 2 to 6%
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. 900 Linear Ft. 300
Depth of Stone in Lines 16"
Water Supply: Individual ( )
Public (✓)

Installed by Harlee Lackey

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: landscape & pipe Gutters so water will not be ran into area of system.
* not recommended to use mulch over lines

CERTIFICATE OF COMPLETION BY L. C. Moore DATE 6-15-79

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