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 Mark L. Gurley DATE 9-30-74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E. Left on Rt 2166 (Rinn Hill Rd.) cross I-40 on left past Rinn Hill Heights S. R. No. _____

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

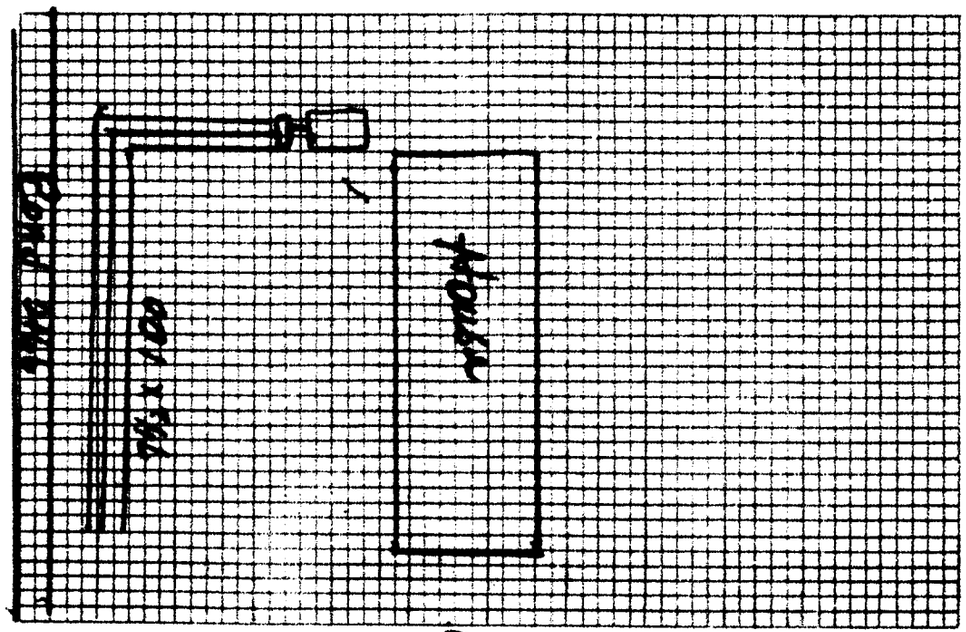
House (✓) (2) Mobile Home ( ) Business (1) Other _____

No. Bedrooms 4 No. Bathrooms 3

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

Lot Area 140 x 400

Character & Porosity of Soil Red Clay
Percolation Rate _____
Topography Slope & Rt. side
Depth to Water Table _____
Rock or other impervious formations None



Plan of System

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 300
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Self

IMPROVEMENTS PERMIT BY _____

COMMENTS: Part of proposed house about complete - 2 bedrooms and 2 baths to be added to other additions. Raised sand nitrification field.

CERTIFICATE OF COMPLETION BY _____ DATE 9/30/74

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