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 Nelson Brown DATE 11-15-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 64 E - Turn Left on Rd # 2155 - Then Left on Rt. 2182 - Go 1 mile House on Rt. S. R. No. _____

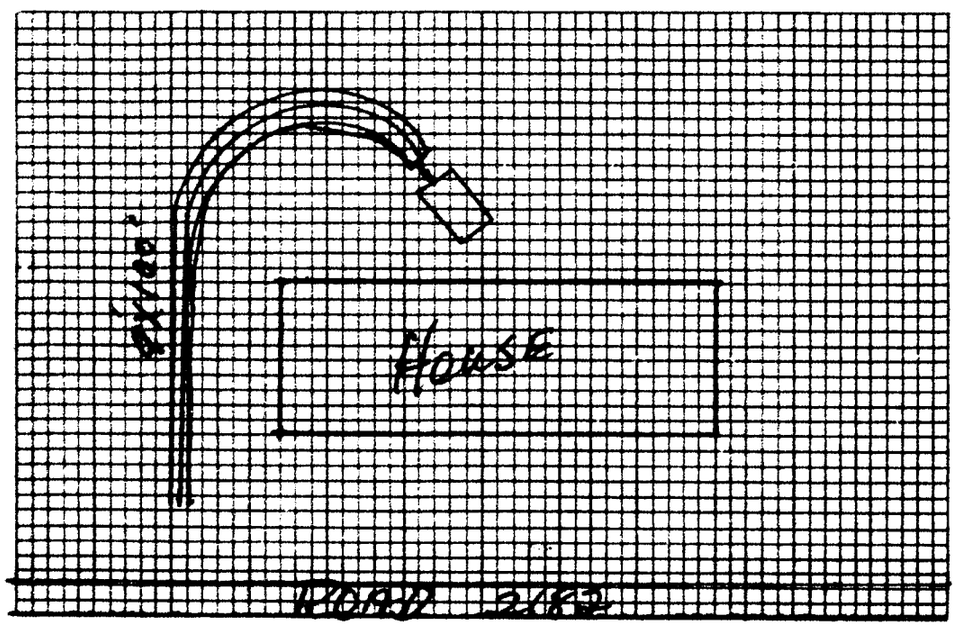
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Red Clay	
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	Loam	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Level	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Loam	
			Rock or other impervious formations	—	

Lot Area ½ ACRE



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public (✓)

Installed by Raymond Adams
Hiddenite, NC

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Todd Jr. DATE 11-15-73

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