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 Bob Shelton DATE 2-4-80 PERMIT NO. _____

PHONE: Business _____ Home _____

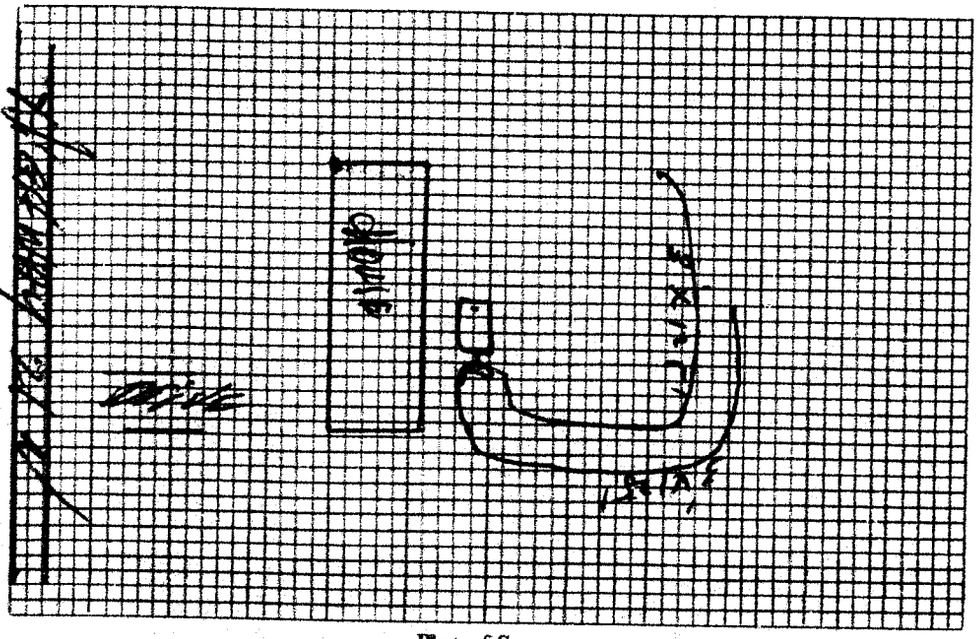
LOCATION 21N Past Turnersburg House on Left after crossing Ostobowens Creek - before Log Cabin 55 - S. R. No. _____

SUBDIVISION NAME _____ LOT NO. # 1 SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil		Clay
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate		1
Auto. Wash. Machine	Yes (✓)	No ( )	Topography		2 to 6% slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table		12"
Lot Area 109 X 200			Rock or other impervious formations		None



Plot of System

Size of Tank 1000 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 Stafford Landscaping

IMPROVEMENTS PERMIT BY _____

COMMENTS: Outside Drainfield Line Inspected and Approved By Mr. R. P. Johnson & Andrews Plumbing

CERTIFICATE OF COMPLETION BY _____ DATE 2/6/80

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