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 Grady McNeil JR. DATE 11-14-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Old Mocksville Rd - #2158 - Cross River - Creek
ON Rt AT INTERSECTION Rd # 2158 - 2142 S. R. No. _____

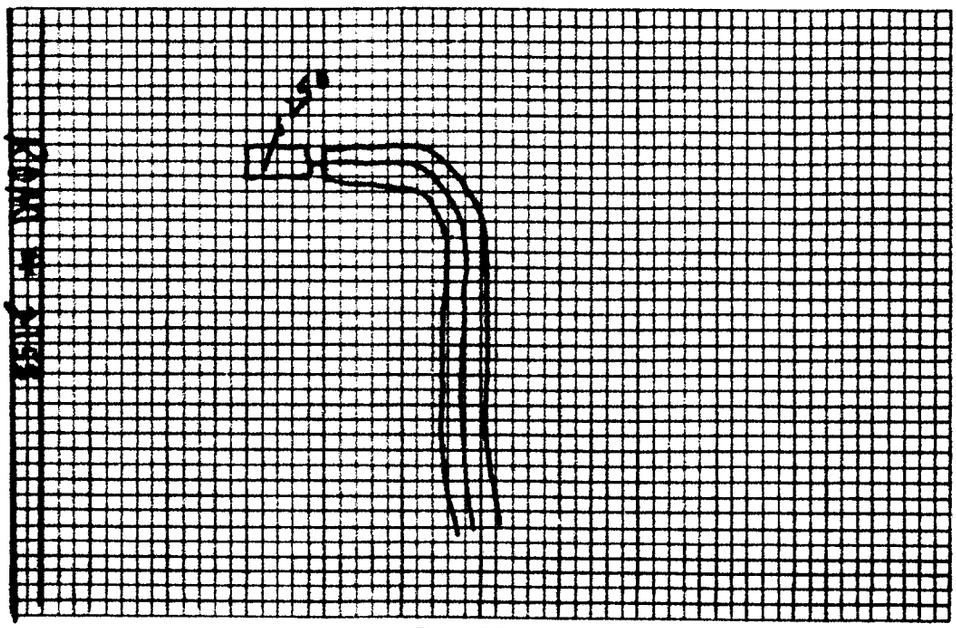
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Red Clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	Fast
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slopi To Back a Side
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Fast
			Rock or other impervious formations	

Lot Area 2 ACRES



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 637½ Linear Ft. 253
Depth of Stone in Lines _____
Water Supply: Individual (✓)
Public ( )

Installed by Glenn ST Jones
Mocksville, N.C.

IMPROVEMENTS PERMIT BY _____

COMMENTS: WATER SUPPLY FROM CARTNER RESIDENCE

CERTIFICATE OF COMPLETION BY Glenn ST Jones DATE 11-14-73

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