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 Ray Moore DATE 11-16-77 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Old Mocksville Rd (Old 75) cross Snath Yadkin Bridge go ~ 1.5 mi T.L. on S.R. 2142 house on left ~ .5 mi. S. R. No. _____

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

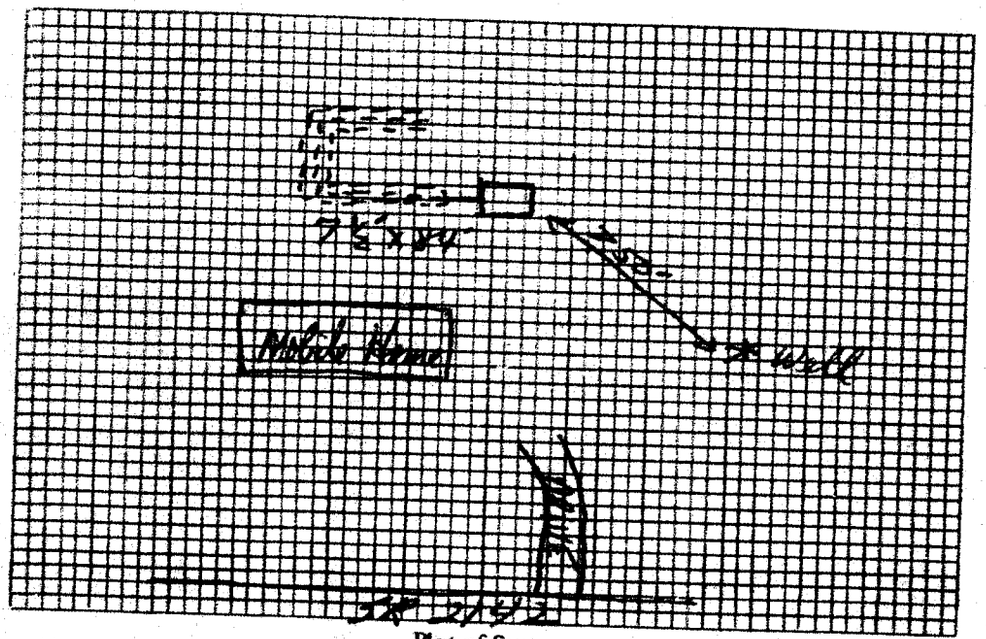
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1½

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

Lot Area acreage

Character & Porosity of Soil Cecil clay loam
Percolation Rate —
Topography 2-4%
Depth to Water Table unk.
Rock or other impervious formations none to.



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10" +
Water Supply: Individual (✓)
Public ( )

Installed by Davie Septic Tank Co.

IMPROVEMENTS PERMIT BY A. E. Causey

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Albert R. Hines DATE 11-16-77

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