IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

Rental Home (Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Homer Williams DATE 13 July 76 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hy 115 N. Driving on left over from 801 1800 just before Cornin Store. Have Look for sign S. R. No. _____

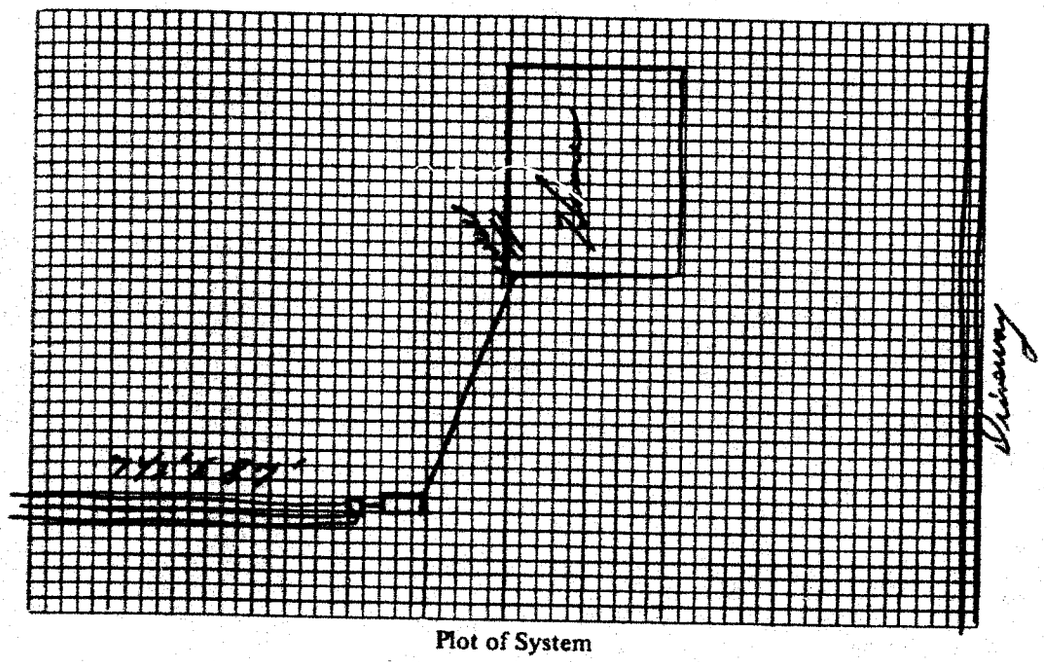
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sand Clay
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate	none
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2 - C & Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	wl
			Rock or other impervious formations	wl

Lot Area acreage



Plot of System

Size of Tank 1500 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 James Harkins

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [illegible] DATE 13 July 76

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