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 Steve Sprinkle DATE 6-26-75 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION Hwy 115 N. House on R. approx 1 mile beyond Central Fire Dept. S. R. No. _____

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

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

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 2 Acres

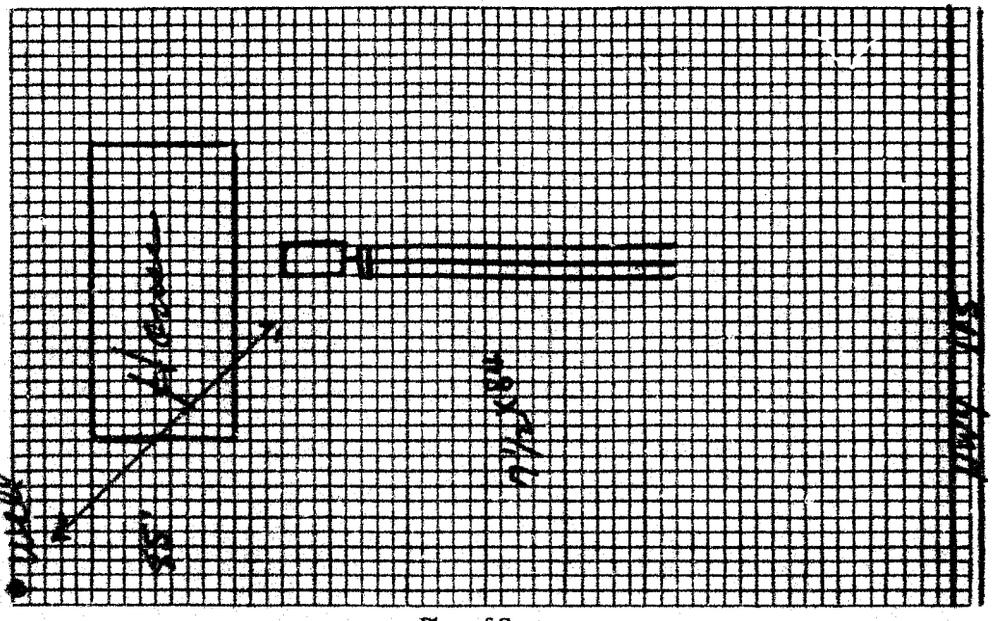
Character & Porosity of Soil Red Clay

Percolation Rate _____

Topography Slight Slope Low.

Depth to Water Table _____

Rock or other impervious formations Some rotten rock in bottom of ditch



Plot of System

Size of Tank 1250 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 John Mincey

IMPROVEMENTS PERMIT BY E. A. S.

COMMENTS: _____

CERTIFICATE OF COMPLETION BY E. A. Stevenson DATE 6-26-75

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