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 Ricky Sparks DATE 9-30-82 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 115 N Fort Central Vol. Fire Dept. Turn SR 1594 before Jordans Express Modular Home on left in wooded area S. R. No. 1594

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

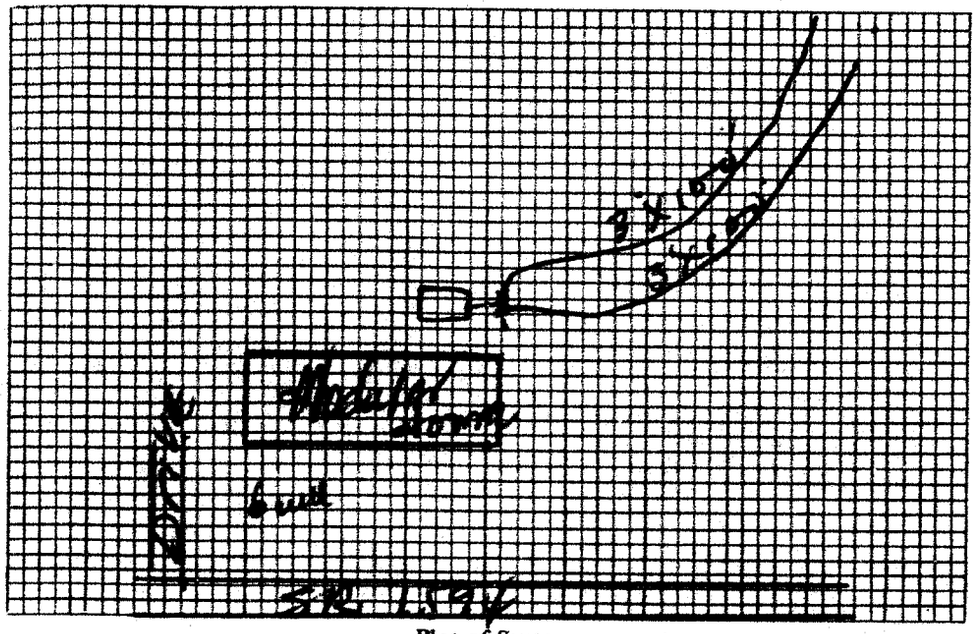
House ( ) Mobile Home (✓) Business ( ) Other _____

Modular

No. Bedrooms	3	No. Bathrooms	1½	Character & Porosity of Soil	Grade
Garbage Disposal Unit	Yes ( )	No	(✓)	Percolation Rate	4 gal/sq ft/appl.
Auto. Dishwasher	Yes ( )	No	(✓)	Topography	6-10%
Auto. Wash. Machine	Yes (✓)	No	( )	Depth to Water Table	10'
Site Suitable	Yes (✓)	No	( )	Rock or other impervious formations	None Reached

Lot Area 1 acre

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by James Hartness

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Todd Jr. DATE 9/30/82

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.
Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold