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 Atwell Holland DATE 7 Aug 75 PERMIT NO. _____

PHONE Business _____ Home _____

LOCATION Hwy 115 N. T.L. on Pregnall Rd. W 1861, T.L. on 1867. house appx 3/10 mi on left.

SUBDIVISION NAME _____ S. R. No. _____

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 acreage

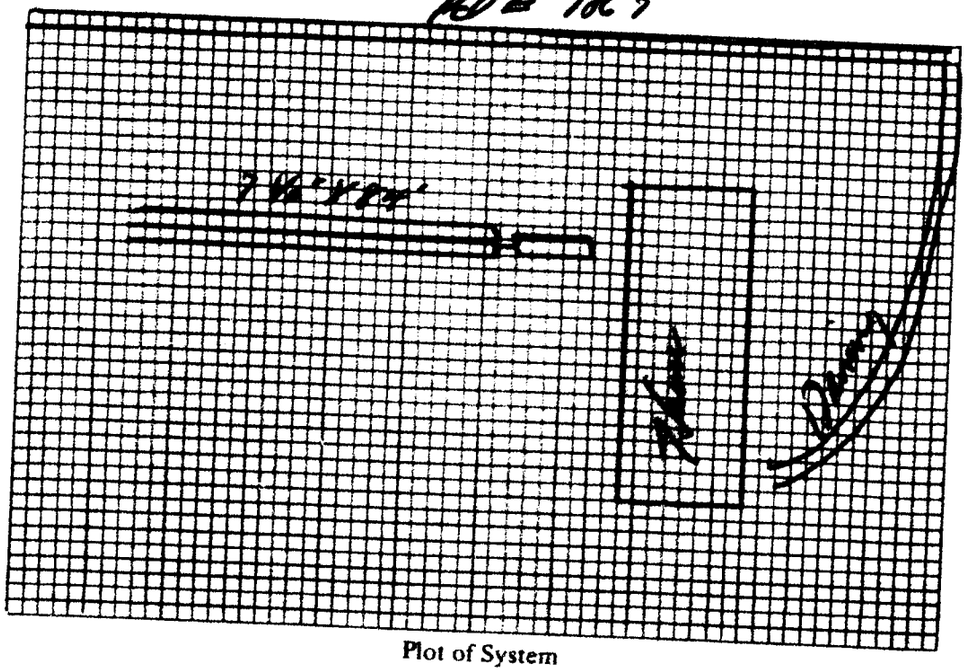
Character & Porosity of Soil Sandy Clay

Percolation Rate _____

Topography Hilly Light to moderate

Depth to Water Table 2'

Rock or other impervious formations 2'



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 18"

Water Supply: Individual (✓)

Public ( )

neighbor well

Installed by James Shelton

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Atwell Holland DATE _____

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