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 Roy Johnson DATE 12 June 71 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21N to Mooresville - T.L. on 901 - 1st paved street (Shore Rd.) on right 1st bldg. on left S. R. No. _____

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

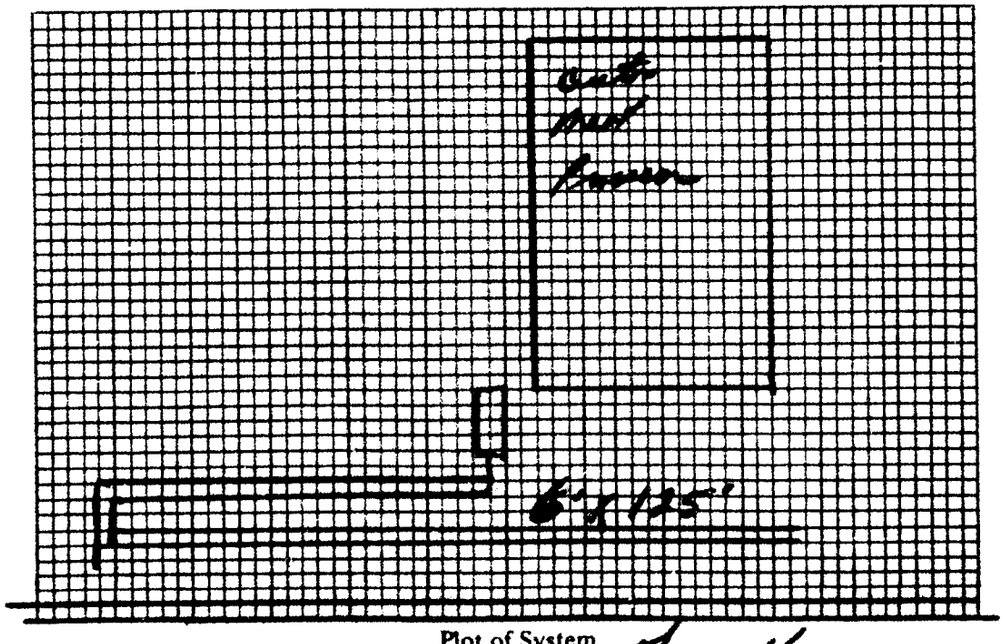
House ( ) Mobile Home ( ) Business ( ) Other Custom Built Premises

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Yes ( )	No ( )	Percolation Rate	none
Auto. Dishwasher	Yes ( )	No ( )	Topography	Slight slope to street
Auto. Wash. Machine	Yes ( )	No ( )	Depth to Water Table	4'
Site Suitable	Yes ( )	No ( )	Rock or other impervious formations	2'

Character & Porosity of Soil Sandy Clay

Lot Area _____



Plot of System Same as

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10" plus

Water Supply: Individual ( )
Public ✓

Installed by Colon Sellers

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY W M Thrash DATE 12 June 71

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