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 Brady Goodwin – DATE 10-29-73 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N. to HARMONY Rt. on 901 E. 60 2 miles
House on Rt. S. R. No. _____

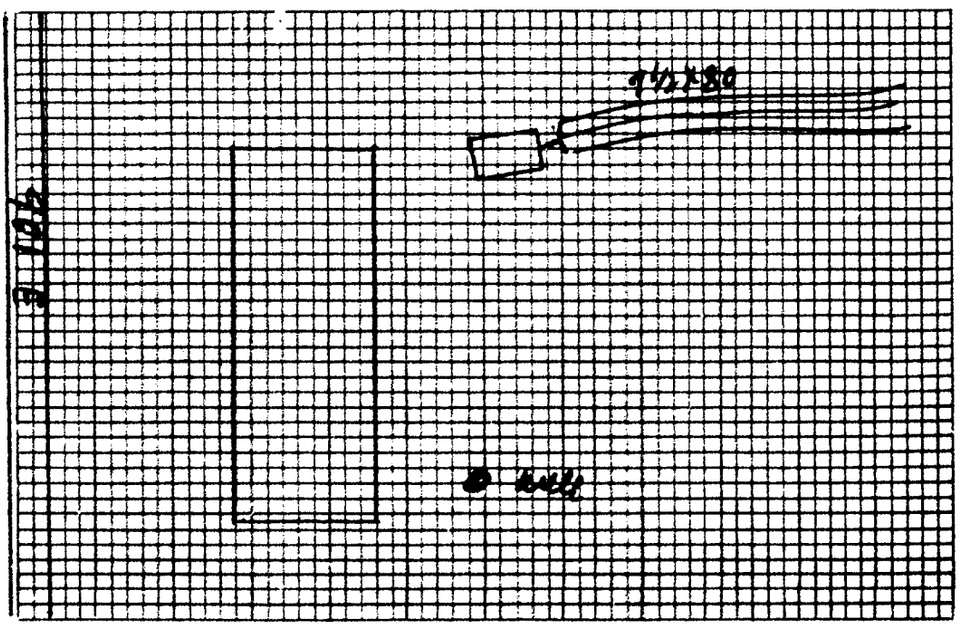
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

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

No. Bedrooms 3 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	sandy	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	[redacted]	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	Slopy to back –	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	Good	
			Rock or other impervious formations	Good	

Lot Area 50 Acres



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 600 Linear Ft. 240
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by J. O. CAIN
R-4 YADKINVILLE, NC

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Glenn Fox Jr. DATE 10-29-73

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