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 Daniel Moore DATE 21 Oct 74 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 21 N. thru Harmony - Past Mayfield - 1 mi after crossing Hamby Creek. Turn on Right. S. R. No. _____

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

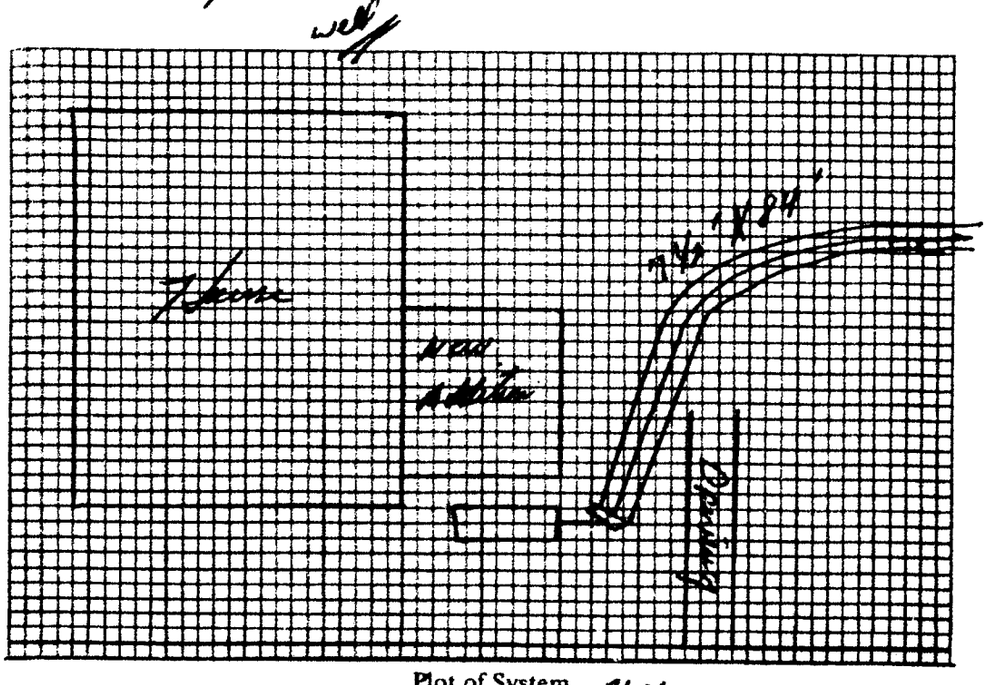
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

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

Character & Porosity of Soil Clay loam
Percolation Rate none
Topography Slope to run of home
Depth to Water Table unk
Rock or other impervious formations unk

Lot Area acreage



Plot of System 21 N.

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 615 Linear Ft. 250
Depth of Stone in Lines 16"
Water Supply: Individual (✓)
Public ( )

Installed by Raymond Adams

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Will Howard DATE 25 Oct 74

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