

**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 Jerry Turner DATE 3-11-82 PERMIT NO. \_\_\_\_\_

PHONE: Business \_\_\_\_\_ Home \_\_\_\_\_

LOCATION 115 N - TL on SR 1571 - 2nd house on left

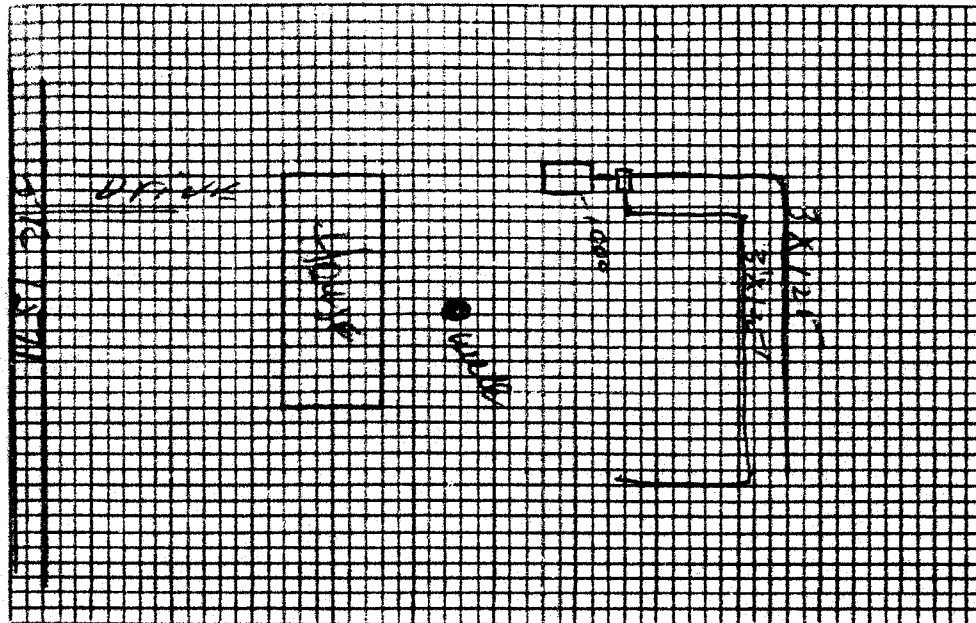
S. R. No. 1521

SUBDIVISION NAME \_\_\_\_\_ LOT NO. \_\_\_\_\_ SECTION OR BLOCK NO. \_\_\_\_\_

House (  ) Mobile Home ( ) Business ( ) Other \_\_\_\_\_ Prov. Surtak

No. Bedrooms 3 No. Bathrooms 1 1/2 Character & Porosity of Soil LMB2  
 Garbage Disposal Unit Yes ( ) No (  ) Percolation Rate as per spec  
 Auto. Dishwasher Yes (  ) No ( ) Topography 2-6% slope  
 Auto. Wash. Machine Yes (  ) No ( ) Depth to Water Table 10'  
 Site Suitable Yes (  ) No ( ) Rock or other impervious formations none

Lot Area 100 X 200  
 Basement with Plumbing \_\_\_\_\_ Basement without Plumbing \_\_\_\_\_  No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 750 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (  )  
 Public ( )

Installed by William Cuthbertson

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

Signed: \_\_\_\_\_

IMPROVEMENTS PERMIT BY \_\_\_\_\_

COMMENTS: \_\_\_\_\_

CERTIFICATE OF COMPLETION BY [Signature] DATE 3/11/82

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.