IREDELL COUNTY HEALTH DEPARTMENT 4616 91 4229

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Ernest L. Brown DATE 9-18-80 PERMIT NO. 296

PHONE: Business _____ Home _____

LOCATION 1100 SR 1175 TL 1458 abt .5 mile on R TR Landover Lane Next to Last lot on R S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 83 SECTION OR BLOCK NO. 7

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

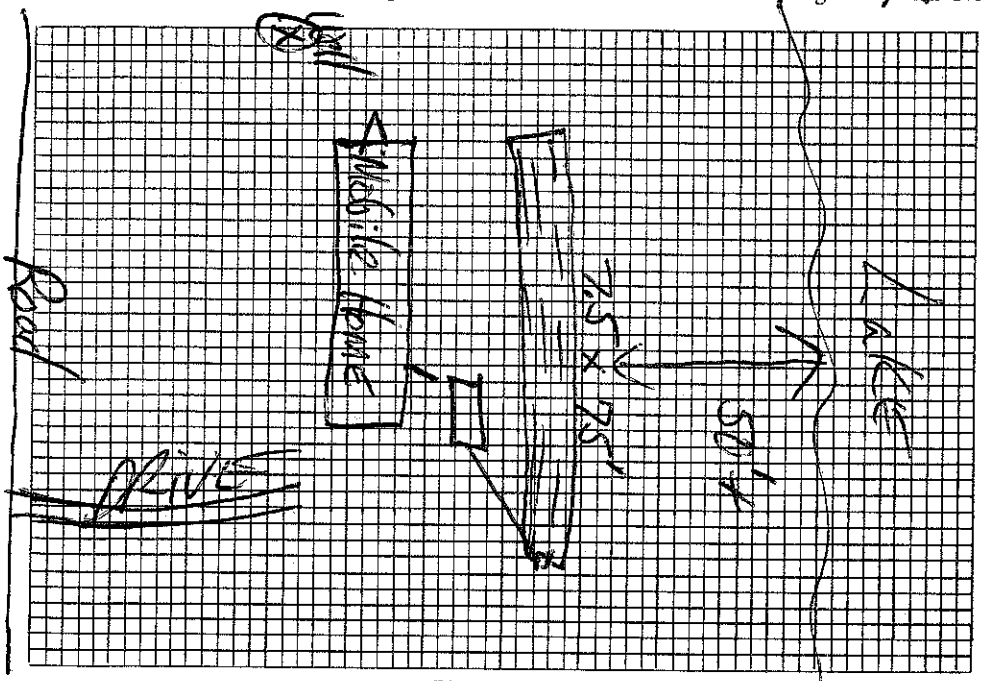
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area .7 Acre

Character & Porosity of Soil _____
Percolation Rate _____
Topography _____
Depth to Water Table Existing System
Rock or other impervious formations _____

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 675 Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (X)
Public ( )

Installed by MRC - 9-2-1966

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system working ok At date of inspected

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 9-18-80

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.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold