Lory Be

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 Marvin Sackett DATE 8-29-85 PERMIT NO. 304

PHONE: Business Brawley School McKendree Chapel Home

LOCATION 1100 TR 1115 TR 1455 (2nd Lake View Drive) ½ mile TL Sharp curve before pavement ends At end on left R. F. D. or S. R. No.

SUBDIVISION NAME Lake Norman LOT NO. 228 SECTION OR BLOCK NO. 8

~~House (X)~~ ~~Mobile Home ( )~~ ~~Business ( )~~ Other Repair Adding garage w/plumbing

No. Bedrooms 2 No. Bathrooms 2½

Garbage Disposal Unit Yes ( ) No (X)

Auto. Dishwasher Yes (X) No ( )

Auto. Wash. Machine Yes (X) No ( )

Site Suitable Yes (X) No ( )

Lot Area Existing

Character & Porosity of Soil

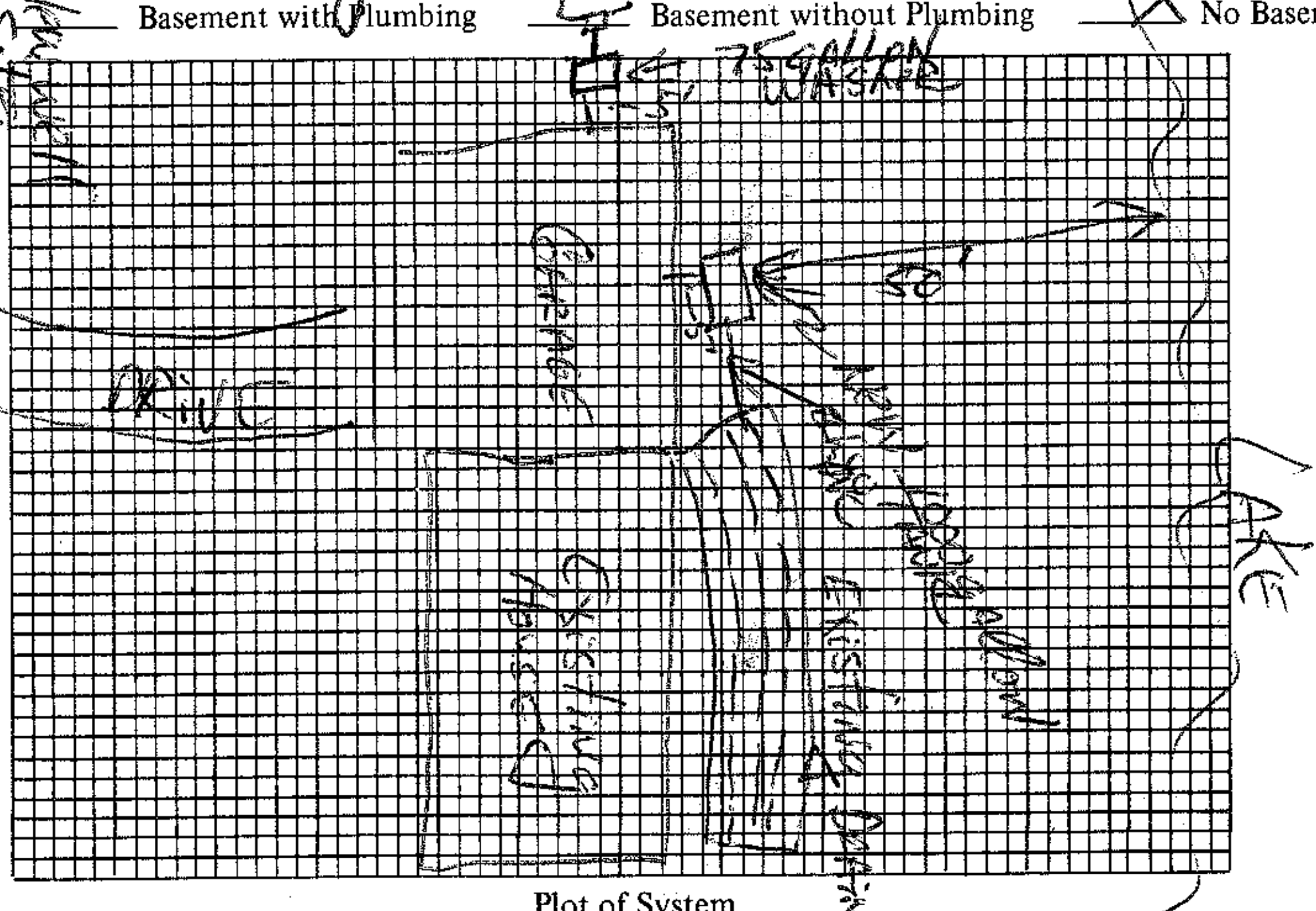
Percolation Rate

Topography Existing System

Depth to Water Table

Rock or other impervious formations

___ Basement with Plumbing ___ Basement without Plumbing X No Basement



Plot of System

Size of Tank New 1000 Gals. 75 gal washer
Nitrification Field:
No. of Lines Existing 2
Sq. Ft. 300 Linear Ft. 100
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by

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

Signed: M B Sackett

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Abandon old well, backfill with clean clay and/or concrete according to NC DEM standards, set new tank 50' from 760 elevation

CERTIFICATE OF COMPLETION BY ___ DATE ___

EXISTING SYSTEM CHECKED BY: ___ DATE ___

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

...it is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making ...ovements Permit.

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