06304

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 Beverly Webb DATE July 27, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TR 1236 (Stonemarker) ~½ mile TR Hanes Bee Lane on left

S. R. No. _____

SUBDIVISION NAME CL&T Lake Norman LOT NO. 1695 SECTION OR BLOCK NO. 6

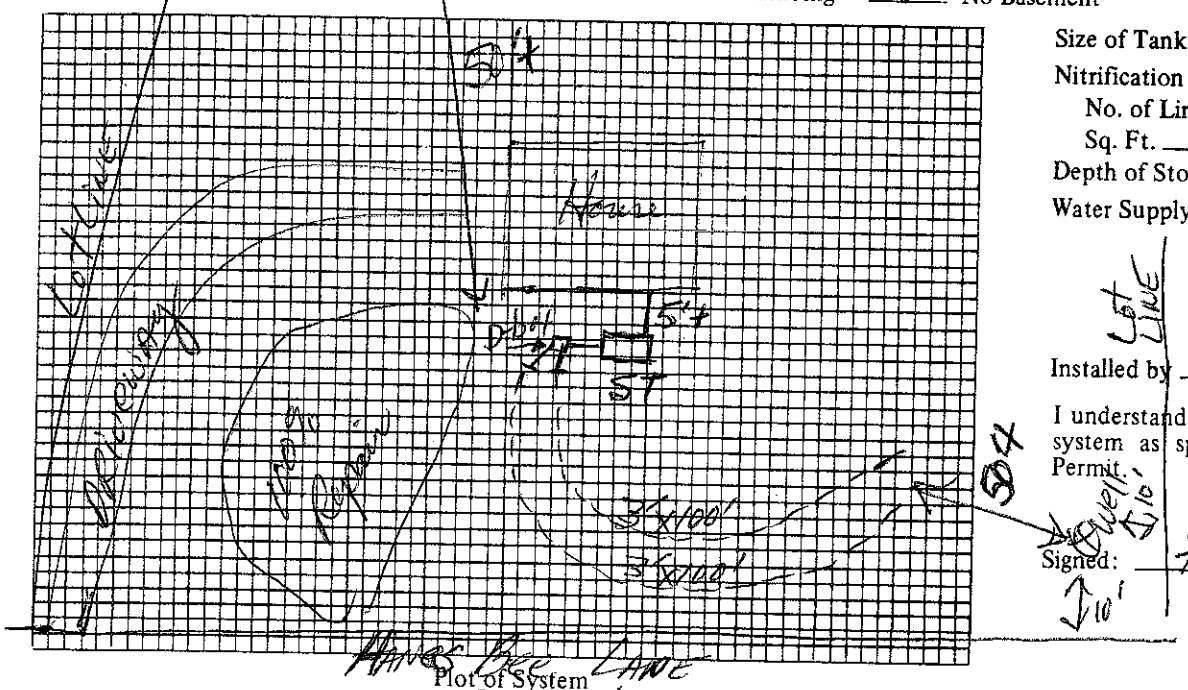
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	sandy clay	
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	2.4	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-6%	
Site ~~Suitable~~	Yes (✓)	No ( )	Depth to Water Table	4+	
			Rock or other impervious formations	none obs.	

Lot Area ½ AC +

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed: * for Webb

IMPROVEMENTS PERMIT BY D. L. Hanson, LS.

COMMENTS: Follow contour with drainfield. Install drainfield at a depth of 24" to bottom of pipe (12" cover)

CERTIFICATE OF COMPLETION BY _____ DATE _____

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.

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