4624-29-8194

12405

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 Mark Spear DATE 4/10/91 PERMIT NO. 2D-1-A-64

PHONE: Business _____ Home _____

LOCATION Stonemarker Rd, on (R) at intersection of Tiger Ln.

S. R. No. 1236

SUBDIVISION NAME CL+T Lake Norman LOT NO. 1693 SECTION OR BLOCK NO. 6

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

No. Bedrooms 3 No. Bathrooms 2.5

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

Lot Area 1.7 ac.

Character & Porosity of Soil PS - Clay / micaceous

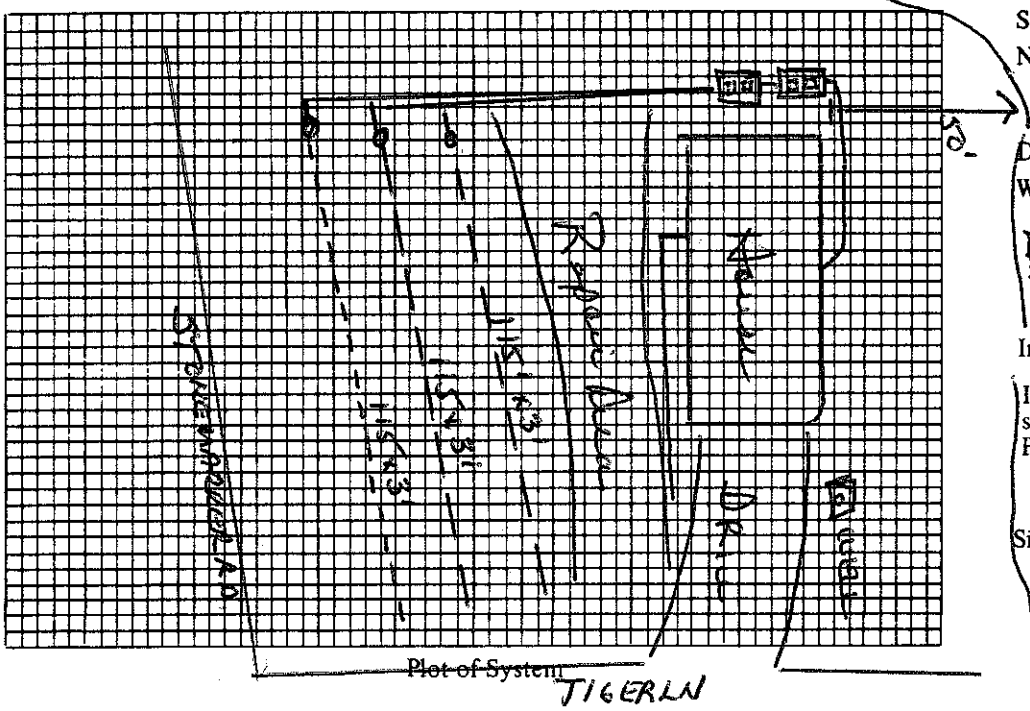
Percolation Rate .35

Topography 10%

Depth to Water Table > 48"

Rock or other impervious formations none observed

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank 1000 / 1000 Gals.

Nitrification Field:

No. of Lines 3 @ 115'

Sq. Ft. 1035 Linear Ft. 345

Depth of Stone in Lines _____

Water Supply: Individual (✓)

Public ( )

Installed by Rowan Septic Tank Co.

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks RS. DATE 4/10/91

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