4625097428

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 R. D. Matthews DATE 4-25-86 PERMIT NO. 214

PHONE: Business _____ Home _____

LOCATION 1100 TL 1177 (Chuckwood) TL Barbers Loop (1458) TL 1450 (Anderson) 2nd lot on left

SUBDIVISION NAME Lake Norman LOT NO. 142 SECTION OR BLOCK NO. 7 S. R. No. _____

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

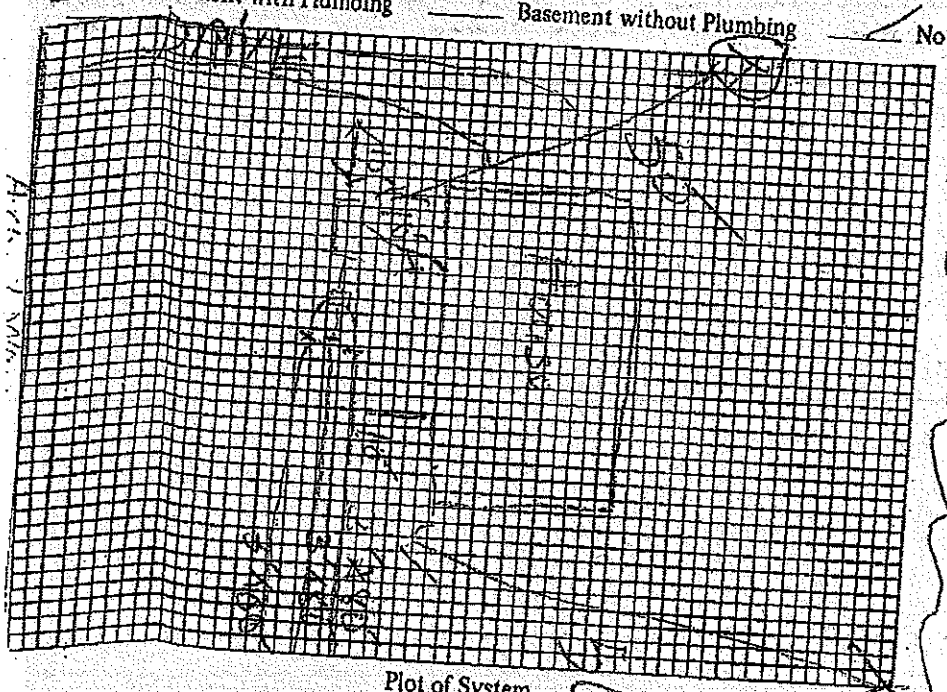
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area 20,000ft²

Character & Porosity of Soil Clay loam
Percolation Rate .5 gal/ft²/day
Topography 2-8%
Depth to Water Table 41
Rock or other impervious formations None 265

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 11"
Water Supply: Individual (✓)
Public ( )

Installed by J. L. Backhoe

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

Signed: _____

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Charles K. Barnett

EXISTING SYSTEM CHECKED BY: _____ DATE 4-25-86

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. _____ DATE _____

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