4626095486

Across from Bruce D. Stephens

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 Tim Bowen Realty DATE 4-16-84 PERMIT NO. 126

PHONE: Business _____ Home _____

LOCATION 1100 TR 1115 TR 1455 16 lock TR 1292 (Abbott Road Bear Left 1455 ~ 0.2 mile Relief Street Lot on left S.R. No. _____

SUBDIVISION NAME LAKE NORMAN LOT NO. 256 SECTION OR BLOCK NO. 8

House (X) Mobile Home ( ) 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 ~ 3/4 ACRE

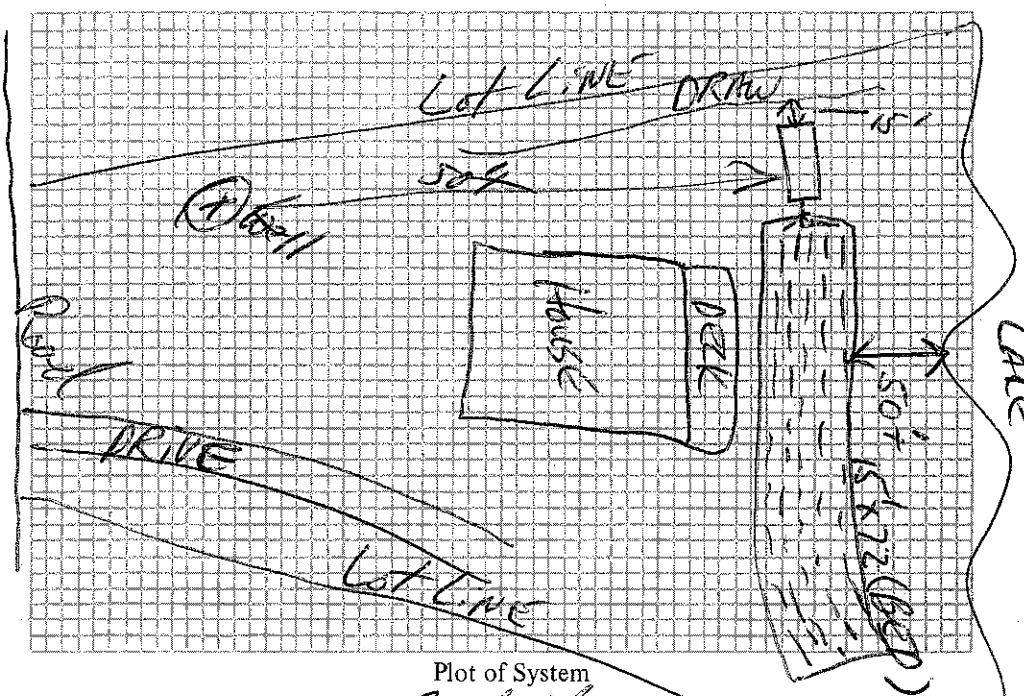
Character & Porosity of Soil Clay loam

Percolation Rate 0.5 gal/ft 24 hrs

Topography 6-10%

Depth to Water Table 4'

Rock or other impervious formations NONE Obs.



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 5

Sq. Ft. 1050 Linear Ft. 360

Depth of Stone in Lines 15"

Water Supply: Individual (X) Public ( )

Installed by J. R. Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 4-16-84

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