4626 4-07-130

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 William C Helms DATE 4-14-08 PERMIT NO. _____

PHONE: Business 283-1196 Home 537-3191

LOCATION 1100 TR on 1170 at end

S. R. No. 1170

SUBDIVISION NAME Lake Norman LOT NO. 7 SECTION OR BLOCK NO. 61

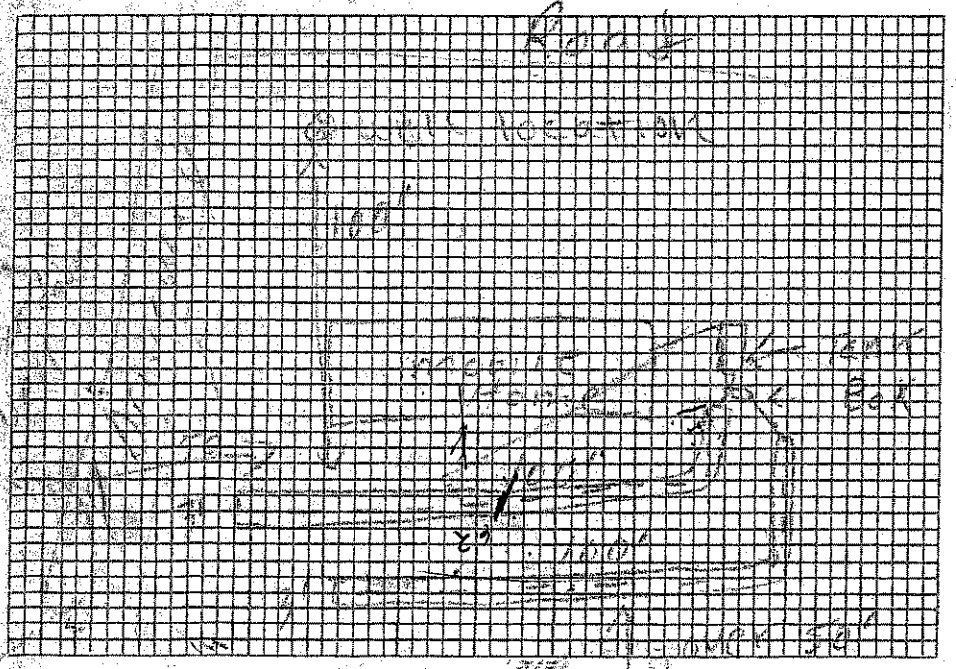
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 3/4 acre

Character & Porosity of Soil sandy clay & decomposed rock
Percolation Rate 45 min/inch
Topography 40% Slope
Depth to Water Table 10'
Rock or other impervious formations possibility of heavy rock & restrictive formations see comments



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 18"
Water Supply: Individual (✓)
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY Lake J.C. Moore

COMMENTS: install system in area designated if rock is heavy & restrictive call Health Dept & we will lay it out in another area.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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

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