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 W. T. Barrow DATE 3-31-78 PERMIT NO. 39

PHONE: Business _____ Home 663-5544

LOCATION 1100 TR on 1127 TR on 1238 on Lot _____ S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 52 SECTION OR BLOCK NO. 2

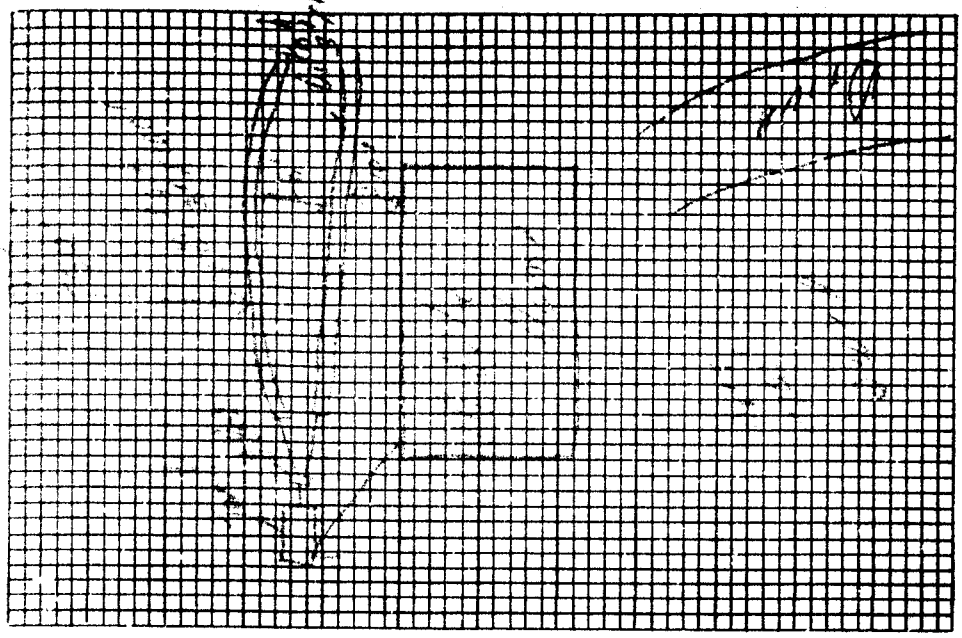
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Clay loam
Percolation Rate 60 6 min/in
Topography 2 to 5%
Depth to Water Table 4 to 8
Rock or other impervious formations None Seen

Lot Area 2 acre



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 24"
Water Supply: Individual (✓)
Public ( )

Installed by Winkhouse House Movers

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 5-4-78

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