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 Leigh Elrod DATE 6/10/88 PERMIT NO.

PHONE: Business Home 375-1295

LOCATION 1100 TR Chuckwood TR 1674 (Indian Loop) ~ 3/4 mile on R. S. R. No.

SUBDIVISION NAME C L & T LOT NO. 1673 SECTION OR BLOCK NO. 7

FUTURE PRESENT
House (✓) Mobile Home (✓) Business ( ) Other

No. Bedrooms 3 No. Bathrooms 2

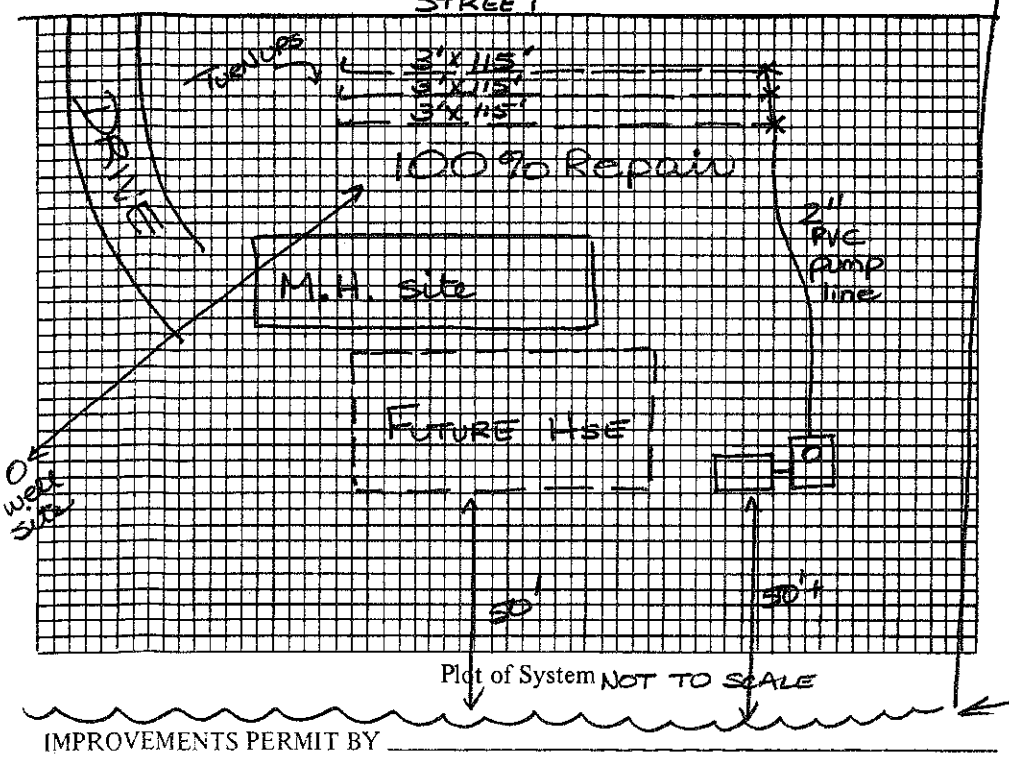
Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil clayey
Percolation Rate .4 gpa 1ft²
Topography 60%
Depth to Water Table 4'+
Rock or other impervious formations none observed

Lot Area 1.2 Acres

FUTURE PRESENT
✓ Basement with Plumbing ____ Basement without Plumbing ____ No Basement

P.T. : 1000 gallons



Plot of System NOT TO SCALE

LAKE NORMAN

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 1035 Linear Ft. 345
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by F.J. Ervin

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY André C. Prince DATE 6/9/88

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