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 Bob Cooley DATE 5-23-78 PERMIT NO. 28

PHONE: Business _____ Home 664-2557

LOCATION 1100 TR on 1115 Then TL on 1445 Then TL on 1446 1/8mi on left S. R. No. 1446

SUBDIVISION NAME Lake Norman LOT NO. 97 SECTION OR BLOCK NO. 8

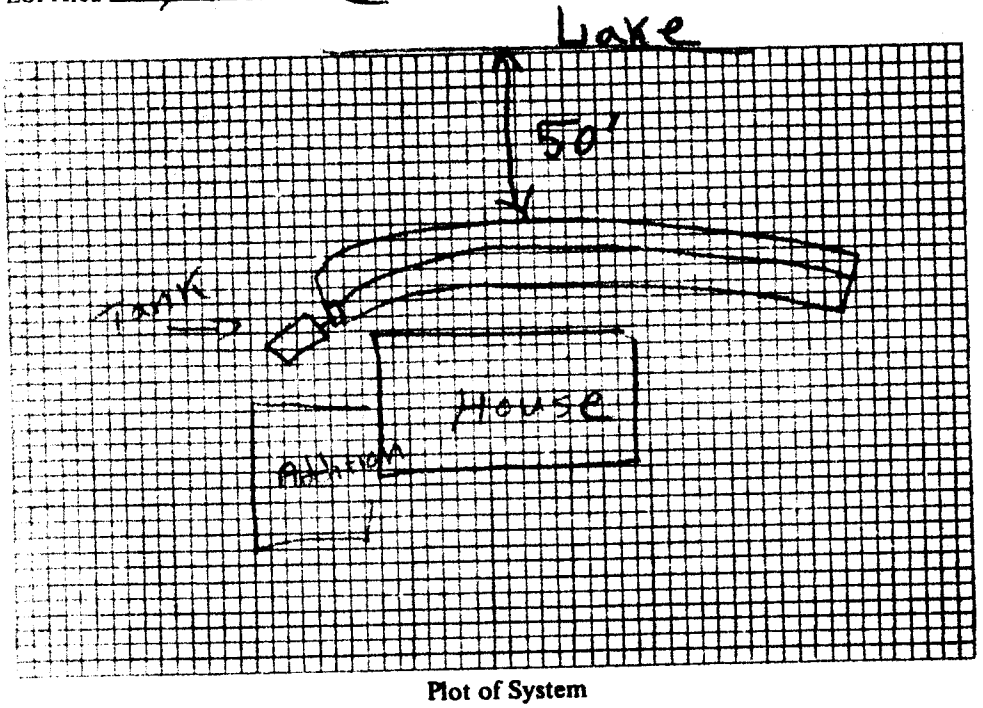
House (✓) Mobile Home ( ) Business ( ) Other Adding bath

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 3/4 acre

Character & Porosity of Soil _____
Percolation Rate _____
Topography EXISTING
Depth to Water Table _____
Rock or other impervious formations SYSTEM



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 562½ Linear Ft. 225
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Swain Septic Tank (Shelby N.C.) 1968

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: System is adequate for addition

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 5-2[illegible]

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