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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 Joe Smith DATE 5-19-92 PERMIT NO. _____

PHONE: Business _____ Home 701-8018

LOCATION 1100 TR on [illegible] 145 Then TL on 1445 Turn last on 1st on right S. R. No. _____

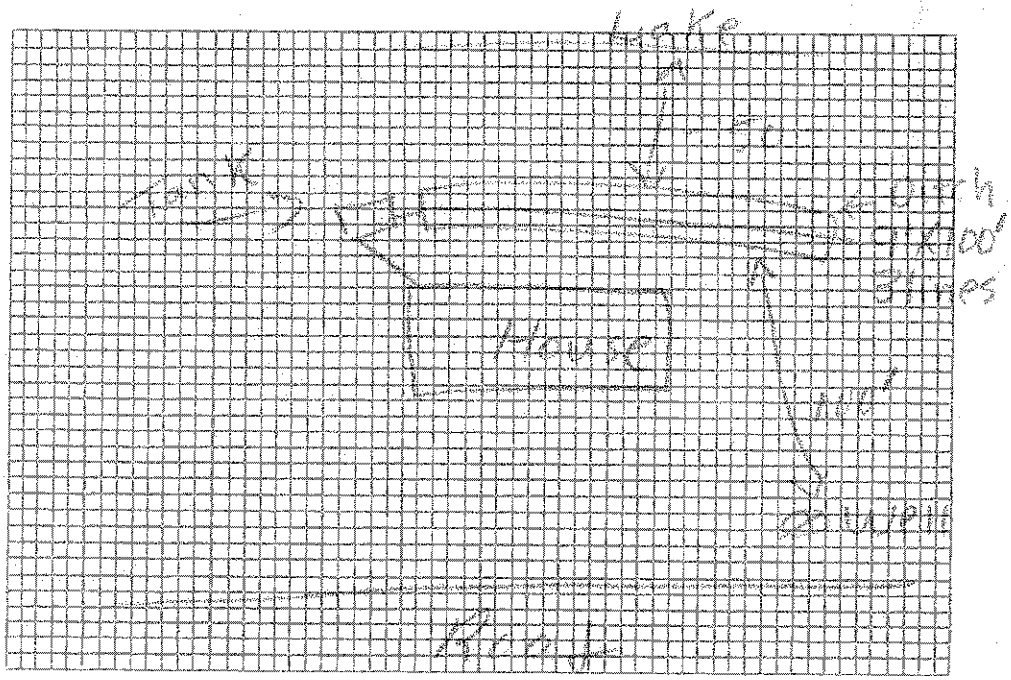
SUBDIVISION NAME Lake Norman LOT NO. 103 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes (✓)	No ( )	Character & Porosity of Soil	Sandy
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	
			Rock or other impervious formations	Shale

Lot Area 3/4 acre



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 18"

Water Supply: Individual (✓)
Public ( )

Installed by J. R. Bowles
12-2-92

IMPROVEMENTS PERMIT BY _____

COMMENTS: System is adequate for above Size Home

CERTIFICATE OF COMPLETION BY [signature] DATE 5-15-92

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