4626 27 7739

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 Julian Smith DATE 1-2-86 PERMIT NO. 1

PHONE: Business _____ Home _____

LOCATION 1100 TR 1115 TR 1445 (Allen Kemp) (2nd Allen Kemp) & 1.0 mile on R

SUBDIVISION NAME LAKE Norman LOT NO. 1634 SECTION OR BLOCK NO. (8) S. R. No. _____

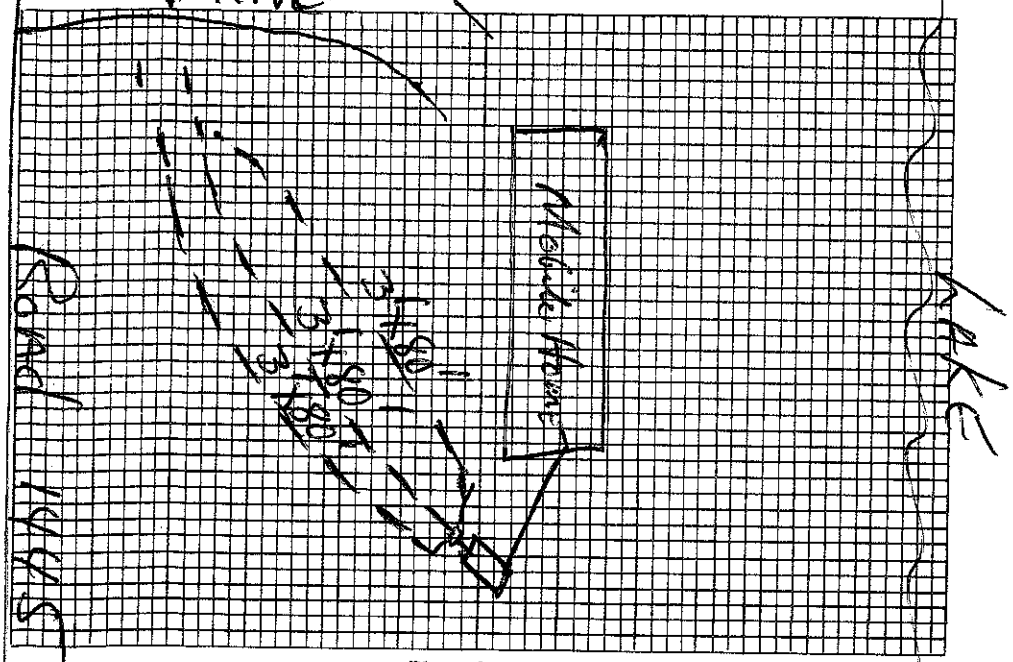
House ( ) Mobile Home (X) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.4 gal/ft²/day
Auto. Wash. Machine	Yes (X)	No ( )	Topography	2-6% slope
Site Suitable	Yes (X)	No ( )	Depth to Water Table	4'
			Rock or other impervious formations	None obs.

Lot Area 1.03 ACRES

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 12"

Water Supply: Individual X
Public ( )

Installed by Richard Abernathy

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

Signed: _____

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: No French drain installed OK by JAC +CKB - Remanent Mottling -- well not down yet

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 1-2-86

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