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 T. J. Kraft DATE 2-14-78 PERMIT NO. 262

PHONE: Business _____ Home 365-3622

LOCATION 1100 TR on 1177 T R on 1238 Near end on left

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 21 SECTION OR BLOCK NO. 7

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

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area .68 ac

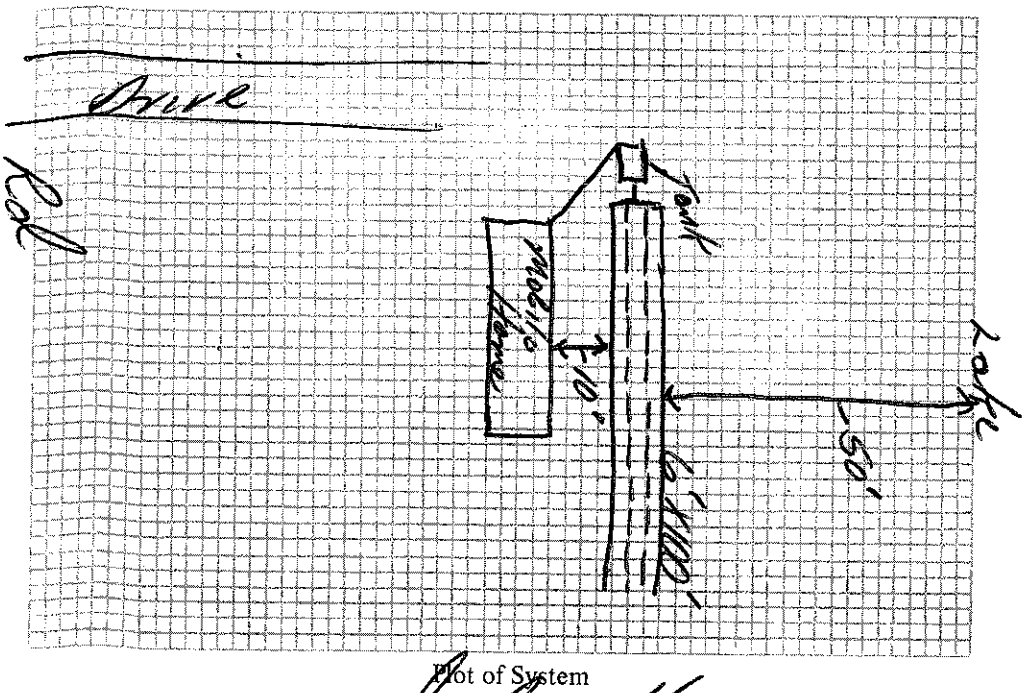
Character & Porosity of Soil Parent Material

Percolation Rate 60 min/in

Topography 25 % Slope

Depth to Water Table 10'+

Rock or other impervious formations Signs of Rock



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"

Water Supply: Individual (✓)
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Signs of Rock on Lot. System to be installed before any Construction done on Lot. Health Dept. to be call before Stone put into ditchs

CERTIFICATE OF COMPLETION BY _____ DATE _____

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