IREDELL COUNTY HEALTH DEPARTMENT

2.00 (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Charles Saunders DATE 11-30-84 PERMIT NO. 327

PHONE: Business _____ Home _____

LOCATION 1400 TR W South Fork Drive (1222) BR 1257
1/2 Mile off left Lake Norman S. R. No. _____

SUBDIVISION NAME LAKE NORMAN LOT NO. 27 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Clay	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.4gpm	Gulley, Mottles present
Auto. Wash. Machine	Yes (X)	No ( )	Topography	10 to 15%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table		
Lot Area	~3/4 ACRE		Rock or other impervious formations	NONE obs.	

(X) Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Size of Tank 1000 Pump TANK 1000 Septic TANK Gals. 500 Surge TANK
Nitrification Field:
No. of Lines 3
~~Sq. Ft.~~ Linear Ft. 200 LFT
Depth of Stone in Lines 12" + 7" panels
Water Supply: Individual (X) Public ( )

Installed by DCC

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

Signed: _____

Plot of System

IMPROVEMENTS PERMIT BY Fred Clemmer, B.R. Boxley, R.W. Johnson

COMMENTS: Keep panels shallow; use 6" interceptor French drain above panels; use good quality effluent pump and associated alarm systems; use 6" washed stone under panels

CERTIFICATE OF COMPLETION BY _____ DATE _____

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