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 Donald Carlson DATE 4-2-86 PERMIT NO. 132

PHONE: Business _____ Home _____

LOCATION 150 W TL 1109 TR 1107 (Brawley School) TR McKendree 1115 TR on Grasshopper BR at fork left on R-4 mile S. R. No. _____

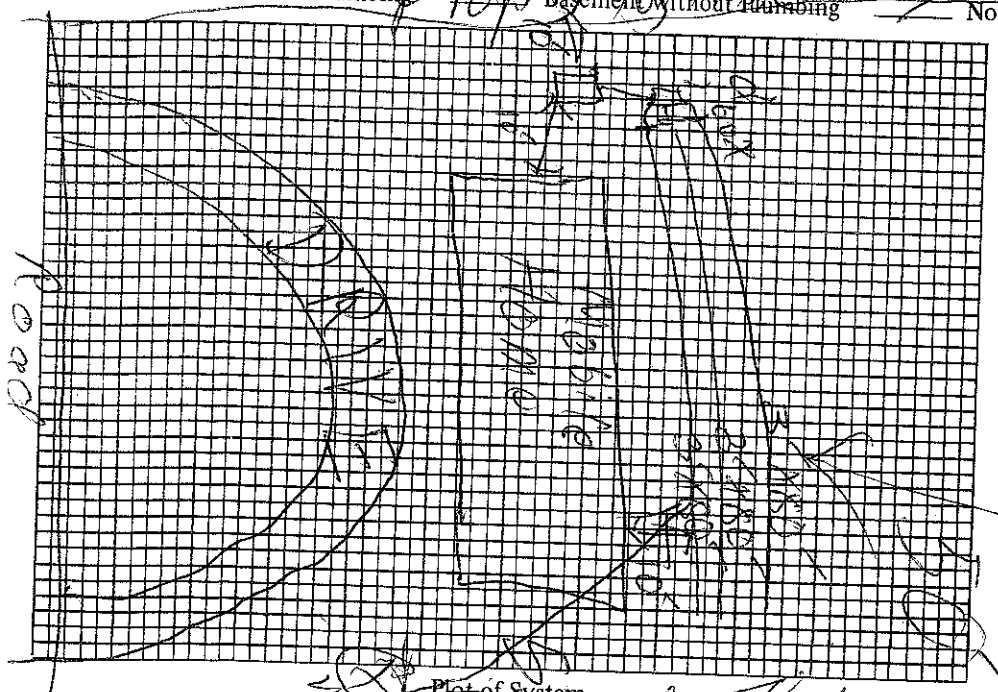
SUBDIVISION NAME Lake Norman LOT NO. 1525 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	0.5 gal/ft²/day
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	6-8%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	4'
Lot Area 20,000 ft²			Rock or other impervious formations	None obs

_____ Basement with Plumbing (✓) Top Rock Pile Basement without Plumbing _____ No Basement



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 (✓)
Public ( )

Installed by _____

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

Signed _____

IMPROVEMENTS PERMIT BY Charles K. Barnett

COMMENTS: keep system to low contour

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