10:30

IREDELL COUNTY HEALTH DEPARTMENT 4626798542

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

OWNER OR CONTRACTOR Larry Davis DATE 10-11-78 PERMIT NO. 254

PHONE: Business 537-8072 Home 537-0011

LOCATION 1100 TR on 1234 TR on 1235

S. R. No.

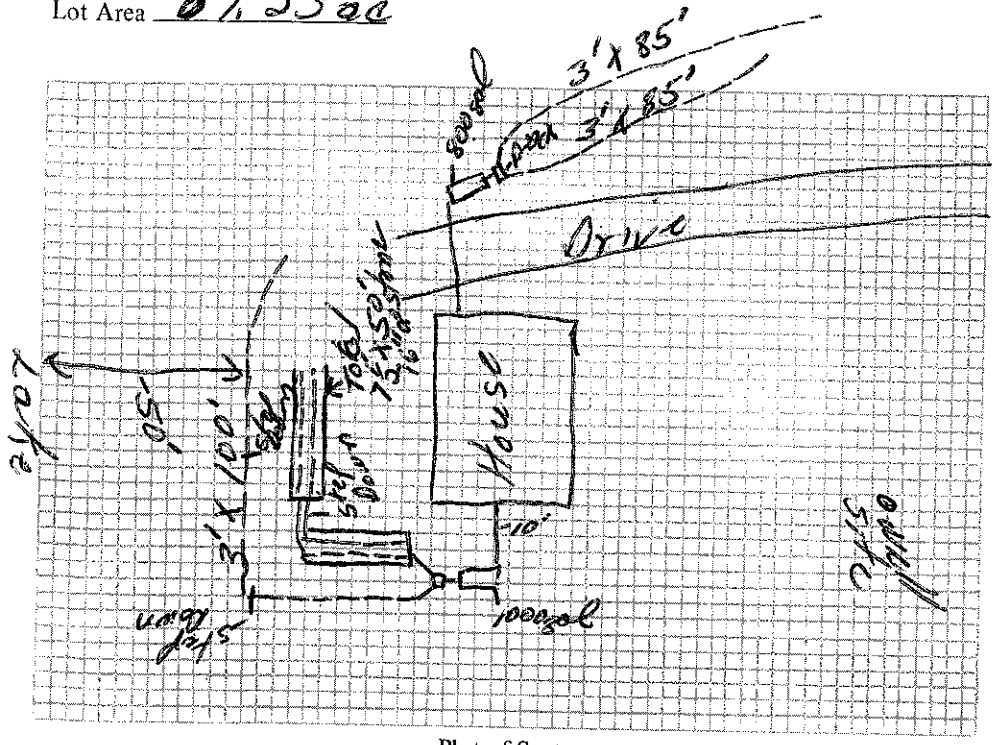
SUBDIVISION NAME Lake Norman LOT NO. 514 SECTION OR BLOCK NO. 8

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	60 min/in
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	10% slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6 to 8'
			Rock or other impervious formations	none

Lot Area 0.123ac



Plot of System

Total

Size of Tank 1000 + 800 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 285 Linear Ft. 370
Depth of Stone in Lines 10" + 16"

Water Supply: Individual (✓)
Public ( )

Installed by Wayne Orbison

IMPROVEMENTS PERMIT BY

COMMENTS:

CERTIFICATE OF COMPLETION BY John Houston 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

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 Larry Davis DATE 9-20-78 PERMIT NO. _____

PHONE: Business 537-8072 Home 537-0011

LOCATION 1100 TR on 1234 TR on 1235

SUBDIVISION NAME Lake Norman S. R. No. _____

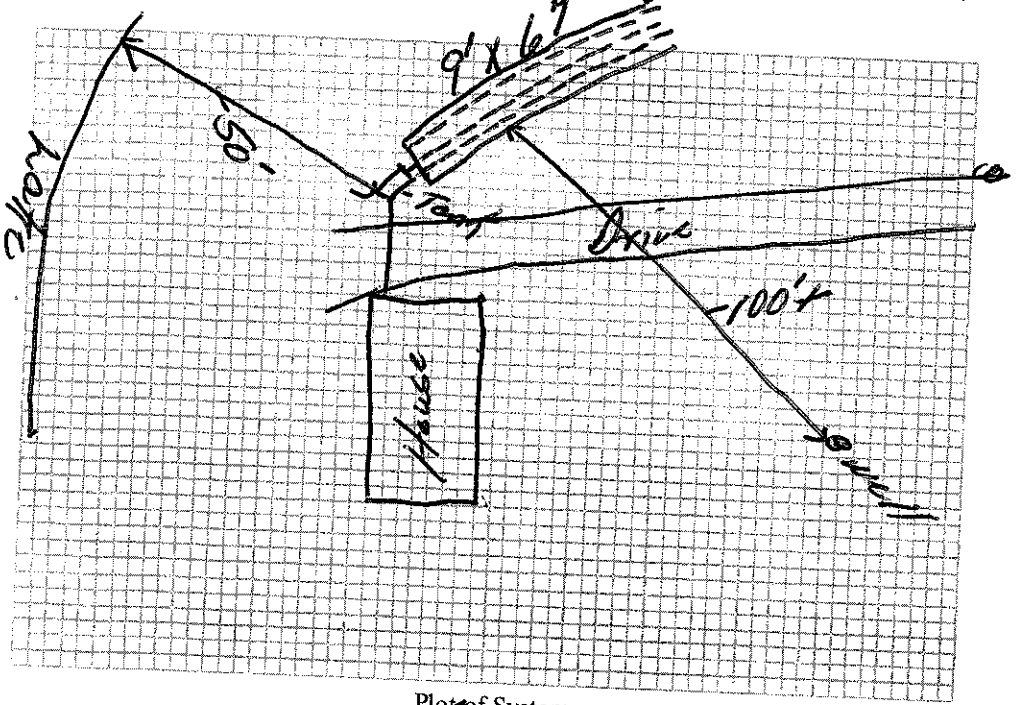
LOT NO. 514 SECTION OR BLOCK NO. 8

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

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	60 min/in
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	10% Slope
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	6' to 8'
			Rock or other impervious formations	None

Lot Area 1.23ac



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: Change Layout : mark on 7-28-78

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