4626883871

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 Robin D. Andrews DATE 12/21/87 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1100 TR Beech Tree (in curve across from Morrison Lumber) TR b/f Kings X Roads on Left Gatehouse S. R. No. _____

SUBDIVISION NAME CL&T Lake Norman LOT NO. 155L2 SECTION OR BLOCK NO. 8

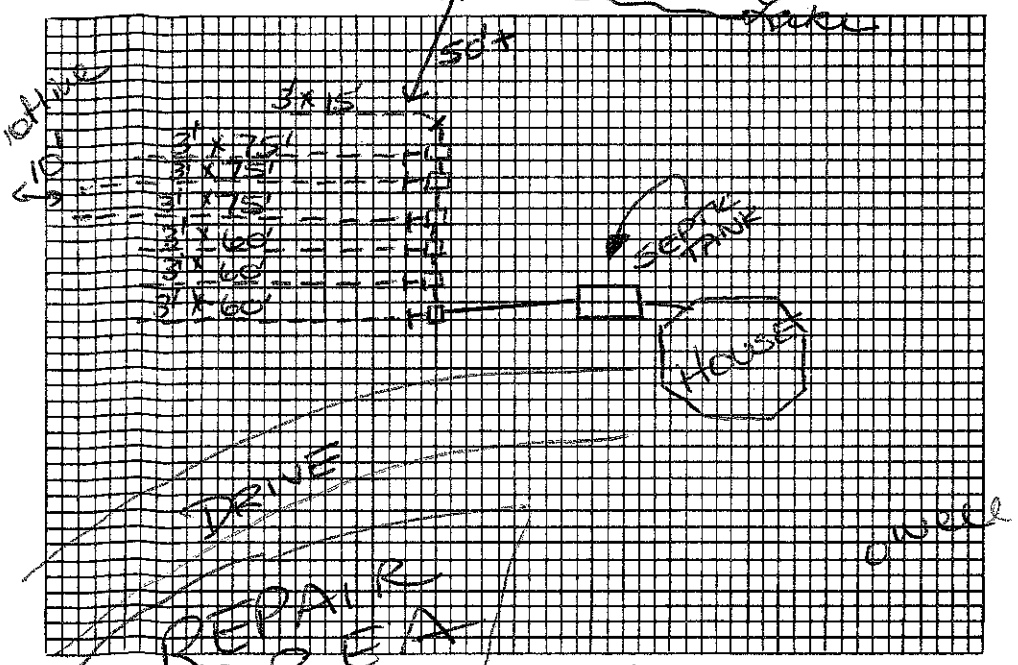
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 4 No. Bathrooms 3
Garbage Disposal Unit Yes (✓) No ( )
Auto. Dishwasher Yes (✓) No ( )
Auto. Wash. Machine Yes (✓) No ( )
Site Suitable Yes (✓) No ( )

Character & Porosity of Soil tight sandy clay
Percolation Rate ~.4 gpd/ft²
Topography 15 = 25%
Depth to Water Table 3'+
Rock or other impervious formations none observed

Lot Area 1.02 Acres

___✓___ Basement with Plumbing Basement without Plumbing _____ No Basement



Plot of System NOT TO SCALE

Size of Tank 1500 Gals.
Nitrification Field:
No. of Lines 7
Sq. Ft. 1260 Linear Ft. 420
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public ( )

Installed by Catherine

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

Signed: _____

IMPROVEMENTS PERMIT BY David Hinson, R.S.

COMMENTS: 1/5/88 - Building inspection passed out

CERTIFICATE OF COMPLETION BY Andrew C. Pierce DATE 12/22/87

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