4626895074

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. G. Phillips DATE 3-19-79 PERMIT NO. 68

PHONE: Business _____ Home 664 3512

LOCATION 1400 TR on 1178 TL on 1234 1 mi on right S. R. No. _____

SUBDIVISION NAME L-11 LOT NO. 526 SECTION OR BLOCK NO. 8

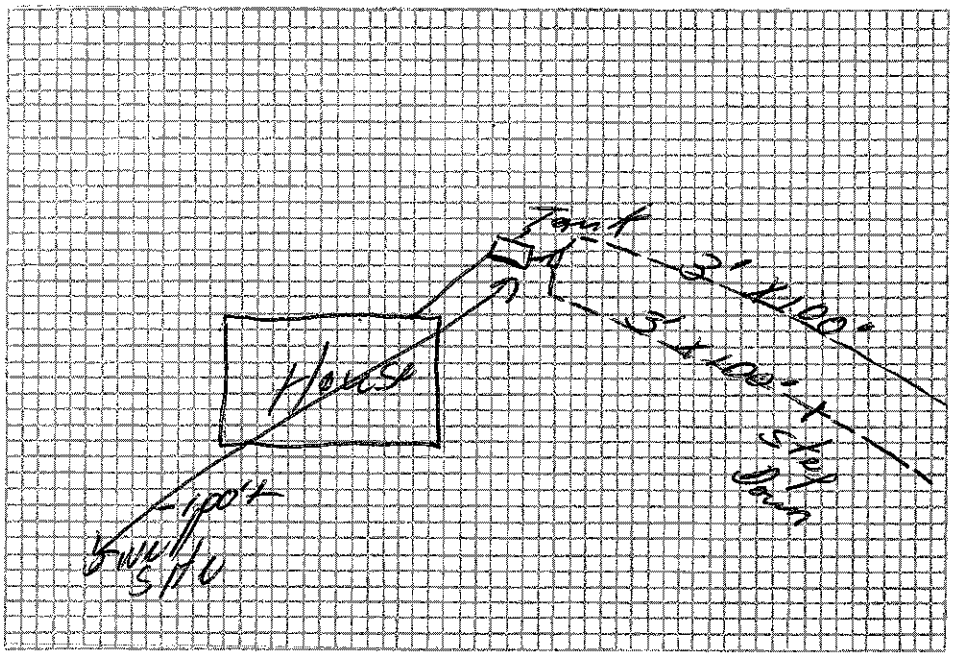
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

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

Lot Area 1½ ac.

Character & Porosity of Soil Clay loam 2:1 Clay
Percolation Rate 120 min/in ft
Topography 25% Slope
Depth to Water Table 10 ft
Rock or other impervious formations Signs of Rock



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by T. R. Bowles

IMPROVEMENTS PERMIT BY _____

COMMENTS: Very poor Soil Conditions where Line One. Water moving Laterially Through Soil

CERTIFICATE OF COMPLETION BY John Houston DATE 3-19-79

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 T.C. Whitis DATE 4-24-12 PERMIT NO. 101

PHONE: Business _____ Home 660-2503

LOCATION Hwy 115 to Beechtree

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 526 SECTION OR BLOCK NO. _____

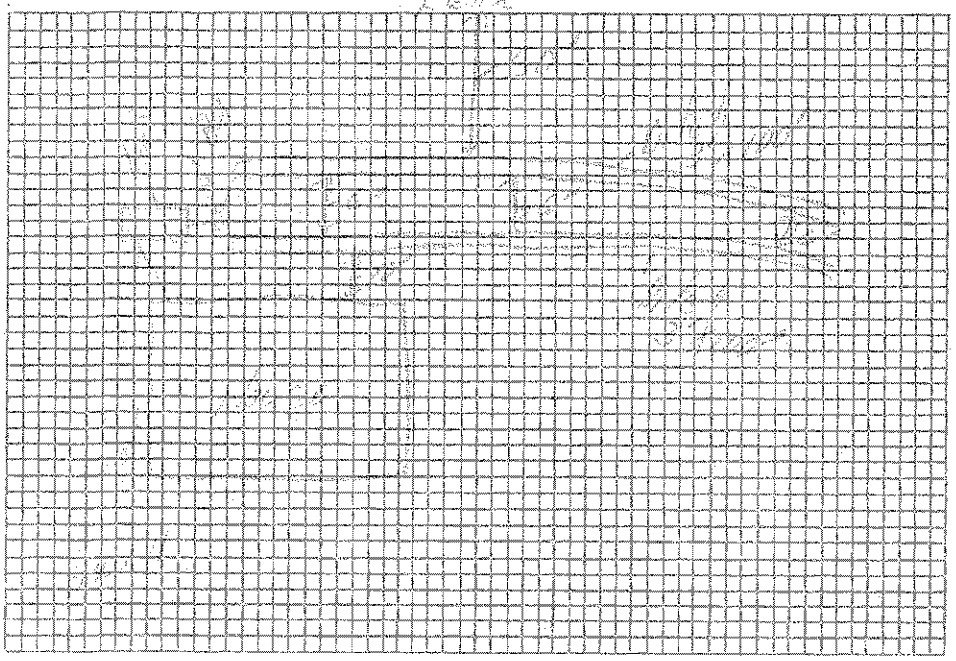
House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2½

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

Lot Area 1.5 acres

Character & Porosity of Soil Sandy Clay
Percolation Rate 45 min/in
Topography Rolling
Depth to Water Table 20 ft
Rock or other impervious formations Type of Rock



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 400 Linear Ft. 400
Depth of Stone in Lines 12"
Water Supply: Individual ( )
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY Bob Shuttleworth

COMMENTS: System to be installed before any further construction. Lines to be laid on the contour of the lot. Trench bottom to be level. Trench bottom to be scarified prior to placement of stone. Stone to be covered with non-woven geotextile fabric.

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