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 Park D. Moss DATE 7-3-84 PERMIT NO. 212

PHONE: Business _____ Home _____

LOCATION I-77 S TR 1109 TL 1100 TR 1115 TR 1455
1 mile on Rt

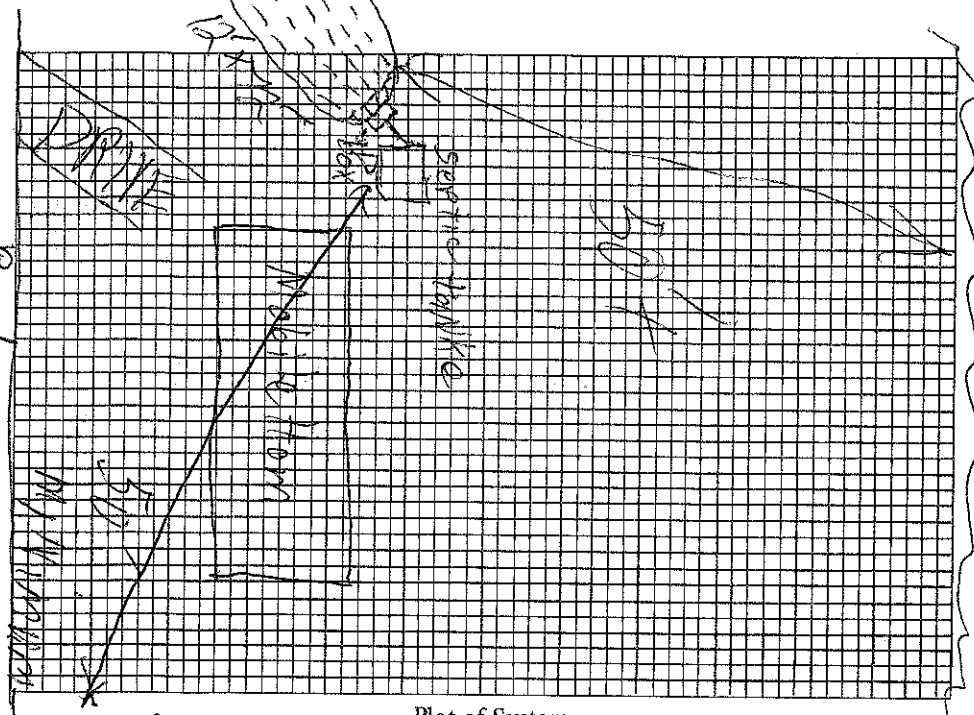
SUBDIVISION NAME Lake Norman LOT NO. ~~15~~ 16/18 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (X)
Auto. Dishwasher Yes (X) No ( )
Auto. Wash. Machine Yes (X) No ( )
Site Suitable Yes (X) No ( )
Lot Area _____

Character & Porosity of Soil Clay loam
Percolation Rate 0.3 gal/ft²/day
Topography 2-10% slope
Depth to Water Table 4'
Rock or other impervious formations None observed



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 5
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

Installed by Claudious Morrison

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

Signed: _____

IMPROVEMENTS PERMIT BY Charles K. Barnett & Fred Clemmer

COMMENTS: (X) Proposed

CERTIFICATE OF COMPLETION BY Charles K. Barnett & Fred Clemmer DATE 7-3-84

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