108 Langdon Rd.

IREDELL COUNTY HEALTH DEPARTMENT 4627-50-0589

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System – G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Charles Setser DATE 1-7-82 PERMIT NO. 3

PHONE: Business _____ Home _____ Digh Circle

LOCATION 1100 TR 1115 TR 1457 Abt 0.5 Mile on R

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 397 SECTION OR BLOCK NO. 8

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

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 ( )	

Character & Porosity of Soil _____

Percolation Rate _____

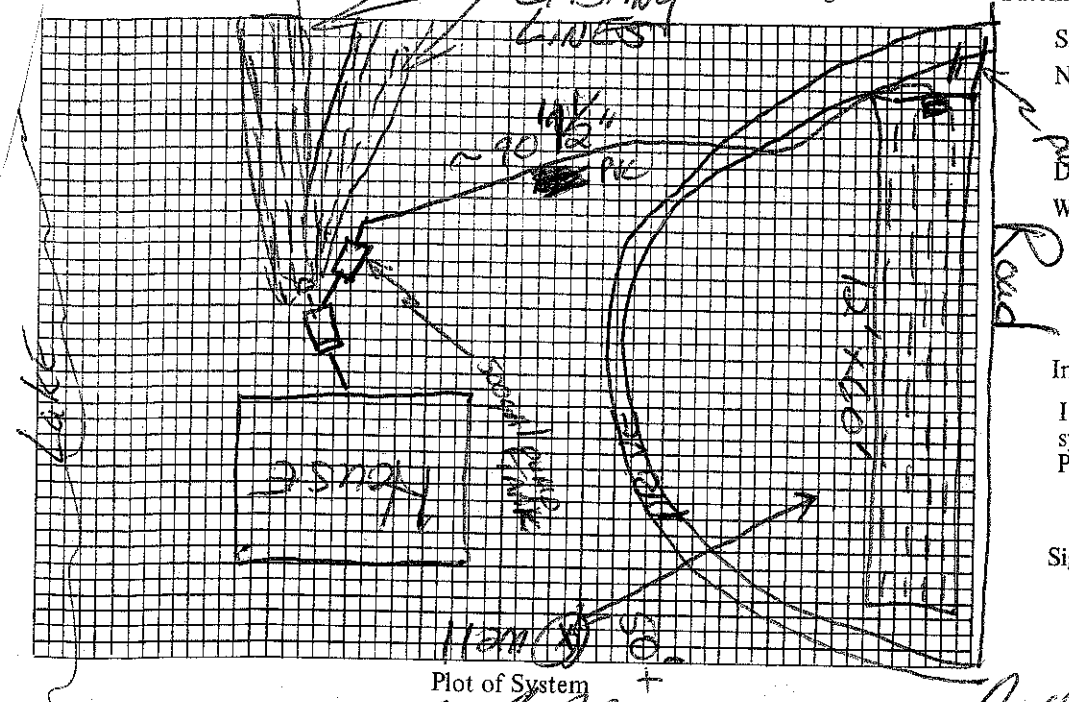
Topography Existing

Depth to Water Table _____

Rock or other impervious formations System

Lot Area Existing

X Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 16"

Water Supply: Individual (X)

Public ( )

Installed by F. J. Erwin Co.

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer + David Henson

COMMENTS: Existing Tank Abt 3.5-4.0' deep - upper lines have approximately 1.0' cover on downhill side - ½ horse Zeigler pump w/ gravity switch

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 1-7-82

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