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 William L. Adams DATE 10-26-81 PERMIT NO. 332

PHONE: Business _____ Home _____

LOCATION 1100 TR 1115 TR 1215 Bear left at Forks ~½ mile on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 134 SECTION OR BLOCK NO. 8

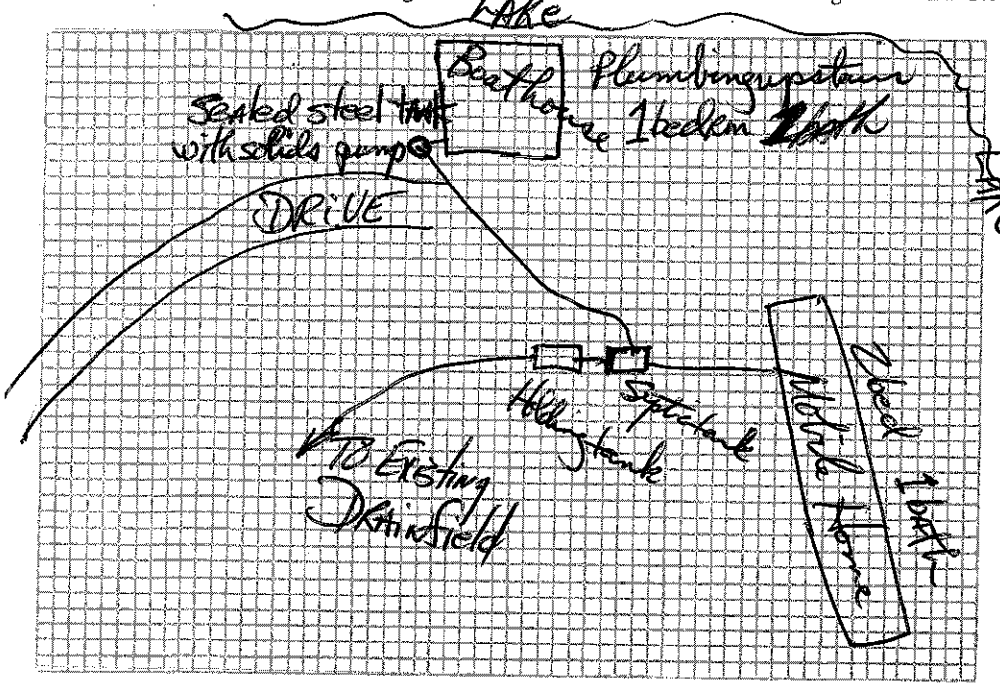
House ( ) Mobile Home (✓) + Boathouse Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate
Auto. Wash. Machine	Yes (✓)	No ( )	Topography
Site Suitable	Yes (✓)	No ( )	Depth to Water Table
			Rock or other impervious formations

Lot Area ~ ¾ ac.

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank Existing 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"

Water Supply: Individual (✓)
Public ( )

Installed by J J Ervin 12-7-76

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing system OK

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: David Harmon DATE 10-26-81

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