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 J. Michael Felts DATE 9-12-84 PERMIT NO. ____

PHONE: Business ____ Home ____

LOCATION 150W TL 1211 TL 1218) TR Hogan Road
At end of R (Dragmore's old lot) S. R. No. ____

SUBDIVISION NAME Lake Norman LOT NO. 143 SECTION OR BLOCK NO. B

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 20,000 ft²

Character & Porosity of Soil Clay

Percolation Rate 0.5 gal/ft²/day

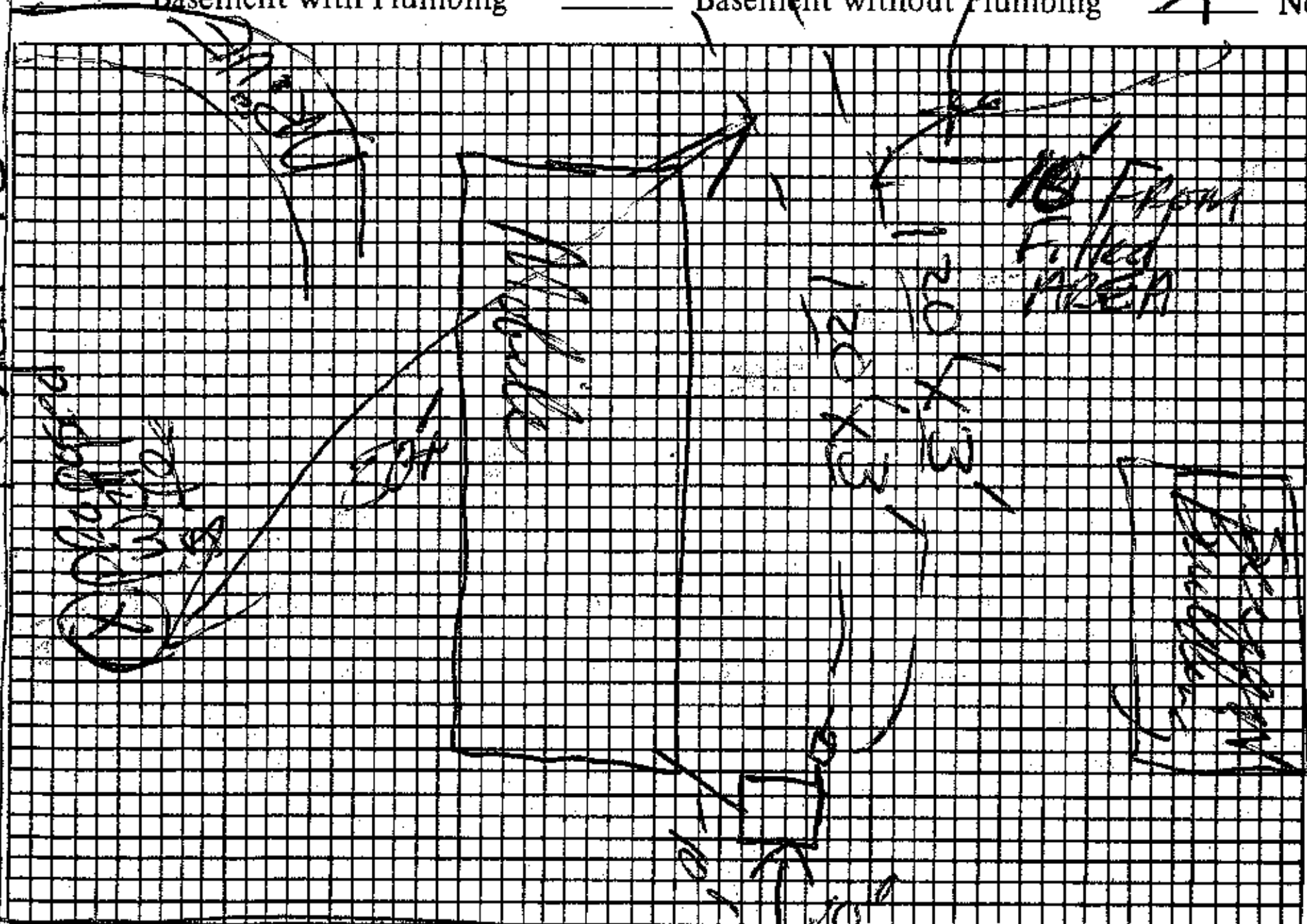
Topography 2-10%

Depth to Water Table 4'

Rock or other impervious formations NONE obs.

____ Basement with Plumbing ____ Basement without Plumbing X No Basement

Road 1218



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 720 Linear Ft. 240

Depth of Stone in Lines 12"

Water Supply: Individual (X) Public ( )

Installed by ____

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

Signed: X J. Michael Felts

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep system shallow, About 1.5' cover
follow contours - Relayout

CERTIFICATE OF COMPLETION BY ____ DATE ____

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