3:30 - 3:45

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 Lake Norman Realty DATE 5-22-84 PERMIT NO. 118

PHONE: Business _____ Home _____

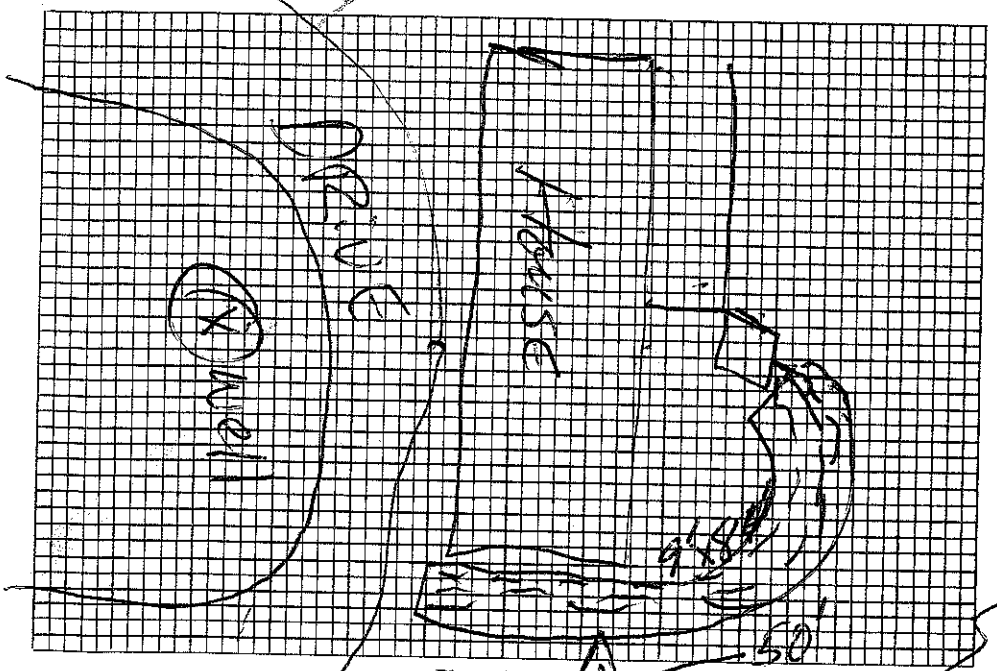
LOCATION 1100 TR 1257 (Agnew Road) (South Fork Road) BR 1.0 mile on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 40 SECTION OR BLOCK NO. 8

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

No. Bedrooms 3 No. Bathrooms 2

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



Plot of System

Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 250
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 Richard Abernathy

IMPROVEMENTS PERMIT BY Fred Clontz

COMMENTS: Pump Tank, check tank for it

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