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 Elmer Horton DATE 9-19-79 PERMIT NO. 289

PHONE: Business _____ Home _____

LOCATION 1100 TR on 1178, TL on 1443 TL on 1444 TR on Honeysuckle Lane At End on Rt S. R. No. _____

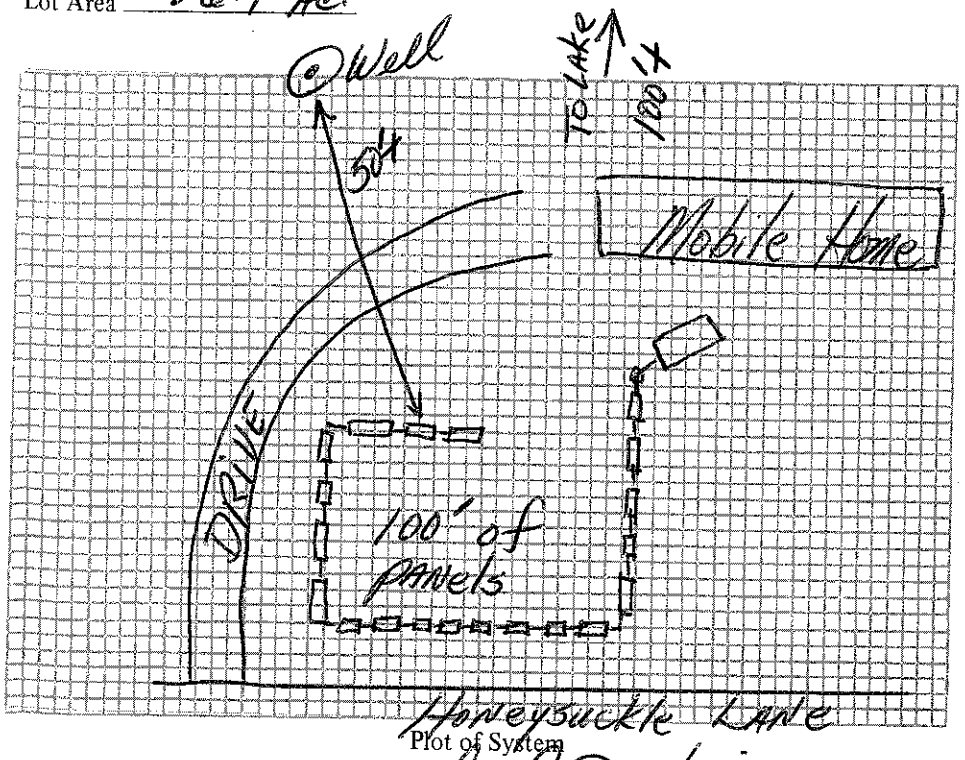
SUBDIVISION NAME Lake Norman LOT NO. 43 SECTION OR BLOCK NO. 9

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	Sandy clay loam
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	30 mpi+0
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	2-4%
Site Suitable	Yes (✓)	No ( )	Depth to Water Table	sunk.
			Rock or other impervious formations	some scattered rock

Lot Area .64 Ac.



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 1 Row of panels
Sq. Ft. _____ Linear Ft. 100'

Depth of Stone in Lines _____

Water Supply: Individual ( )
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY Harold R. Hanson

COMMENTS: Install sewage system first due to presence of rock on property.

CERTIFICATE OF COMPLETION BY _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold