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# 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 Clyde & Joyce Morrow DATE 4/14/88 PERMIT NO. ______

PHONE: Business ______ Home ______

LOCATION 150 W. TL Paradise Peninsula Bear left on Greenbay ~1/2 mile on R. S. R. No. ______

SUBDIVISION NAME CL & T Lake Norman LOT NO. 1140 SECTION OR BLOCK NO. 10

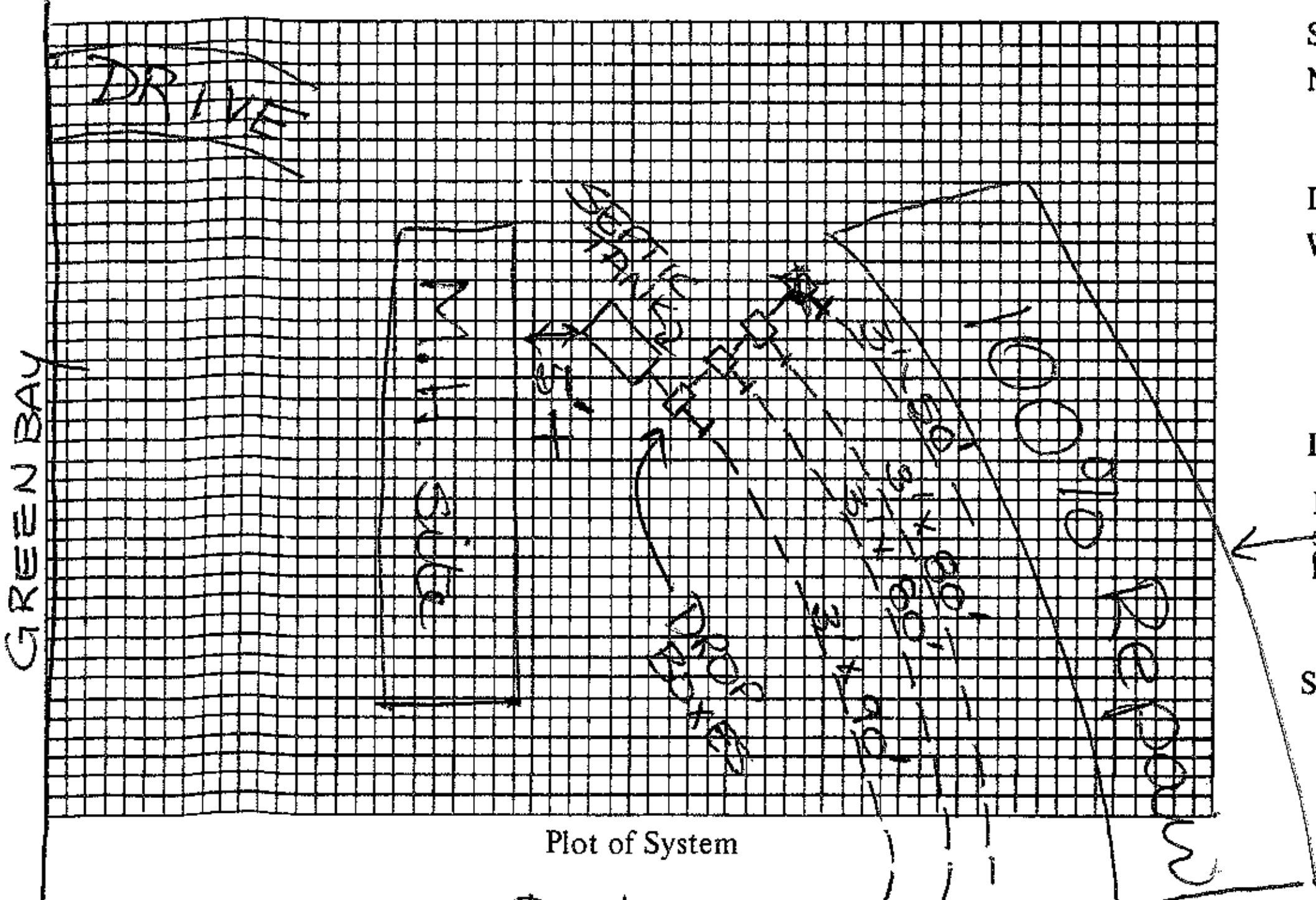
House ( ) Mobile Home (✓) present Business ( ) Other ______

No. Bedrooms 3 No. Bathrooms 2

| | | | | |
|---|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (✓) | Character & Porosity of Soil | Clay |
| Auto. Dishwasher | Yes (✓) | No ( ) | Percolation Rate | ~.4 |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography | 6-15% |
| Site Suitable | Yes (✓) | No ( ) | Depth to Water Table | 4'+ |
| | | | Rock or other impervious formations | none observed |

Lot Area ~1 ACRE

______ Basement with Plumbing ______ Basement without Plumbing ✓ No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. ~~300~~ 300 A.c.f

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by W. Potts

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

Signed: ______

Lake @ 760'

IMPROVEMENTS PERMIT BY DRH

COMMENTS: 3 DROP BOXES. 70' lot line

CERTIFICATE OF COMPLETION BY Andre C. Pierce DATE 4/14/88

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

2
D. 123

# 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 Clyde & Joyce Morrow DATE Sept. 9, 1987 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W. Tl Paradise Peninsula Bear left on Greenbay a ½ mile on Rt. S. R. No. _____

SUBDIVISION NAME CL&T LAKE NORMAN LOT NO. 1140 SECTION OR BLOCK NO. 10

Future ?

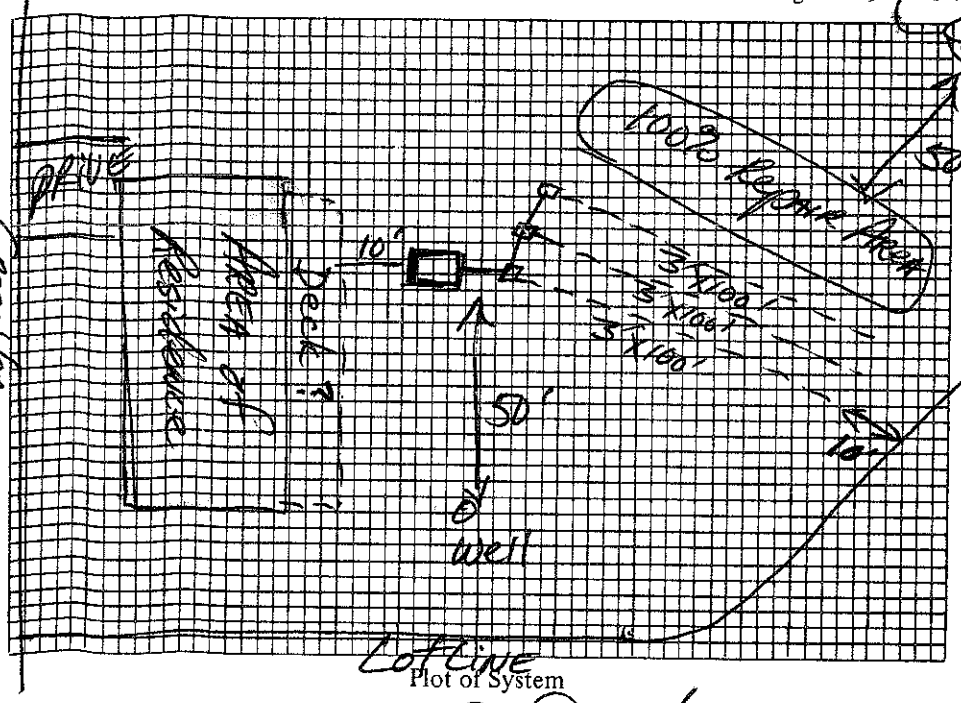
House (✓) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

| | | | | | |
|---|---|---|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No (✓) | Character & Porosity of Soil | Clay | |
| Auto. Dishwasher | Yes (✓) | No ( ) | Percolation Rate | ~ 4 | |
| Auto. Wash. Machine | Yes (✓) | No ( ) | Topography | 6-15% | |
| Site Suitable | Yes (✓) | No ( ) | Depth to Water Table | 44 | |
| | | | Rock or other impervious formations | none obs. | |

Lot Area ~ 1 Ac

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement




Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by _____

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

Signed: X Joyce Morrow

IMPROVEMENTS PERMIT BY David R. Hinson, R.S.

COMMENTS: Well put down prior to visit for issuance of Improvements permit. Residence must be kept close to road so sufficient area for installation and repair of sewage system is available! Follow contour with drainfield. Install drainfield no deeper than 30" to bottom.

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