Mrsal. Office

4627785517

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 Sam Elmore DATE 4-16-96 PERMIT NO. 86

PHONE: Business _____ Home _____

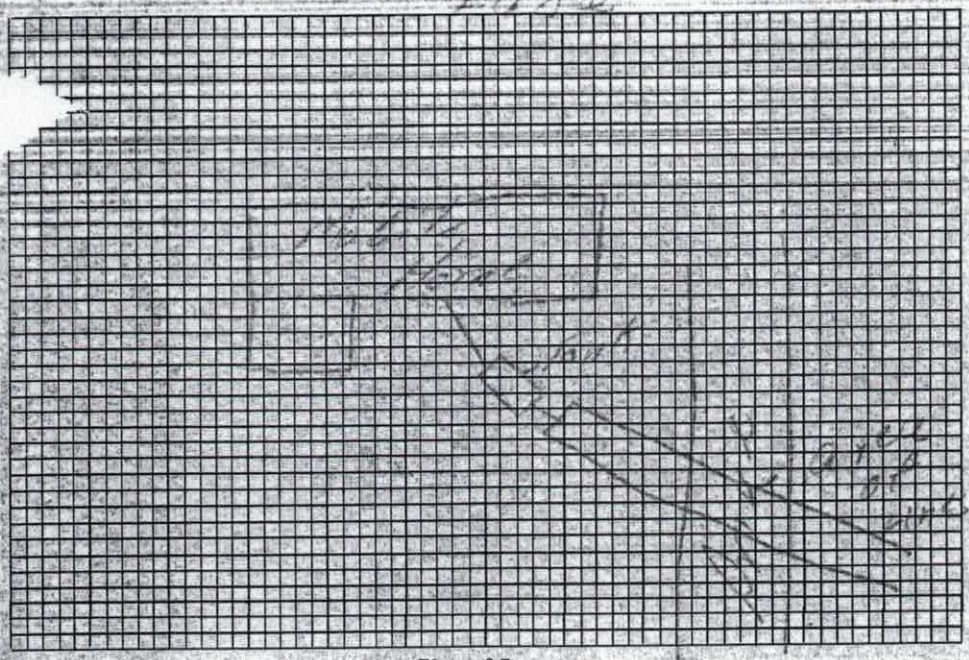
LOCATION 150 W Exon 121 Exon 1219
3rd Trailer on Right S. R. No. _____

SUBDIVISION NAME Lake Norman (CL+T) LOT NO. 168 SECTION OR BLOCK NO. 10

Site Address: 200 Greenbay Rd - Mrsvl.

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

No. Bedrooms 3 No. Bathrooms 2 Character & Porosity of Soil Existing System
Garbage Disposal Unit Yes ( ) No (✓) Percolation Rate _____
Auto. Dishwasher Yes ( ) No (✓) Topography _____
Auto. Wash. Machine Yes ( ) No (✓) Depth to Water Table _____
Site Suitable Yes (✓) No ( ) Rock or other impervious formations _____
Lot Area 2 Acre



Plot of System

Size of Tank Existing Gals.
Nitrification Field:
No. of Lines _____
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual ( )
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: System Functioning Properly at Time of This Inspection

CERTIFICATE OF COMPLETION BY John Houston DATE 4-16-96

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