07067

IREDELL COUNTY HEALTH DEPARTMENT 4628-81-3113

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Samuel H. Davis DATE Aug-16, 89 PERMIT NO. 2N-3-A-310

PHONE: Business _____ Home _____

LOCATION 150 W. TR 1438 (Waddell Rd.) ~1/4-1/2 mile on left

S. R. No. _____

SUBDIVISION NAME OLAT (Lake Norman) LOT NO. 310 SECTION OR BLOCK NO. 11

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

No. Bedrooms 3 No. Bathrooms 3

Garbage Disposal Unit	Yes	(✓)	No	( )	Character & Porosity of Soil Sandy clay
Auto. Dishwasher	Yes	(✓)	No	( )	Percolation Rate ~4
Auto. Wash. Machine	Yes	(✓)	No	( )	Topography 25-30%
Site Suitable	Yes	(✓)	No	( )	Depth to Water Table 4'+
					Rock or other impervious formations none obs.

Lot Area ~3/4 ac.

(✓) Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement

Size of Tank 1250 Gals.

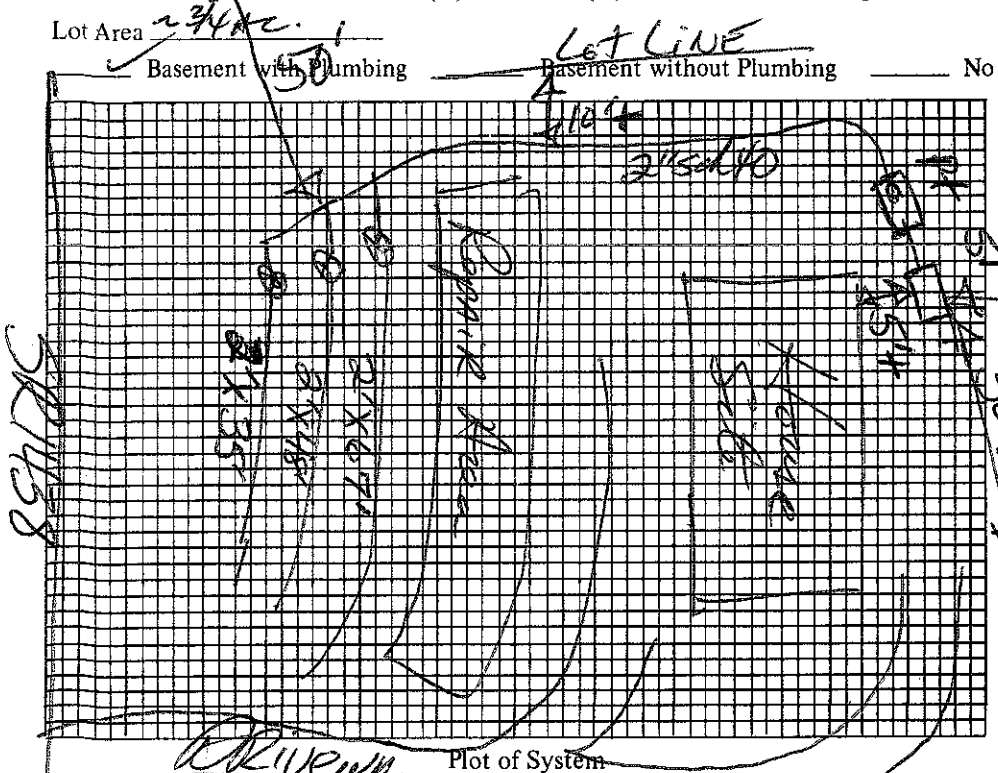
Nitrification Field:
No. of Lines 3
Sq. Ft. _____ Linear Ft. 150 ft
Depth of Stone in Lines 16" to 7

Water Supply: Individual (✓) panels
Public ( ) pressure-dosed

Installed by D. Lackey

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

Signed: _____



Plot of System

IMPROVEMENTS PERMIT BY _____

COMMENTS: Alarm on site, tested, and working; but not mounted (footings poured but house not built)
System adjusted at 1½' pressure head

CERTIFICATE OF COMPLETION BY _____ DATE 8-16-89

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