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 Randy Link DATE 1-28-86 PERMIT NO.

PHONE: Business Home

LOCATION 150 W TR 1438 ~ Knife onR

SUBDIVISION NAME Lake Norman LOT NO. 296 SECTION OR BLOCK NO. 11 S. R. No.

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)
Auto. Dishwasher	Yes (X)	No ( )
Auto. Wash. Machine	Yes (X)	No ( )
Site Suitable	Yes (X)	No ( )

Lot Area 1 Acre

Character & Porosity of Soil

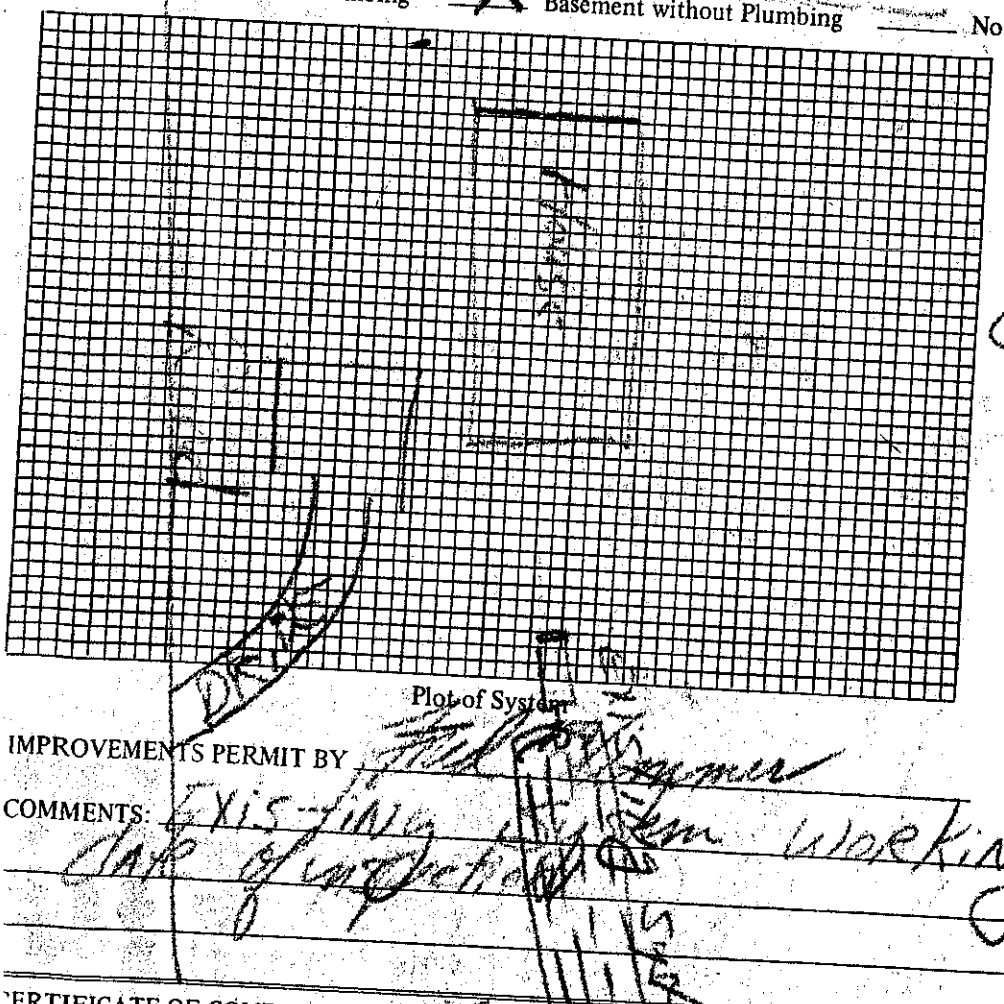
Percolation Rate

Topography Existing

Depth to Water Table

Rock or other impervious formations

_____ Basement with Plumbing X Basement without Plumbing _____ No Basement



9-2-1980

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 130 Linear Ft. 350

Depth of Stone in Lines 16"

Water Supply: Individual (X)

Public ( )

Lake well with hose

Installed by T. J. Irvin Co.

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

Signed:

IMPROVEMENTS PERMIT BY Paul Newman

COMMENTS: Existing System working OK at time of inspection

System checked by Paul Clemmer 9-2-1980

CERTIFICATE OF COMPLETION BY

EXISTING SYSTEM CHECKED BY: Paul Newman DATE

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE 1-26-86

ermit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making nprovements Permit.

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