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 James W. Pickler DATE 8-14-79 PERMIT NO. 288

PHONE: Business _____ Home _____

LOCATION 150 W Turn R Past Rock Quarry 2nt Rd TR 1st lot on left. S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 294 SECTION OR BLOCK NO. 11

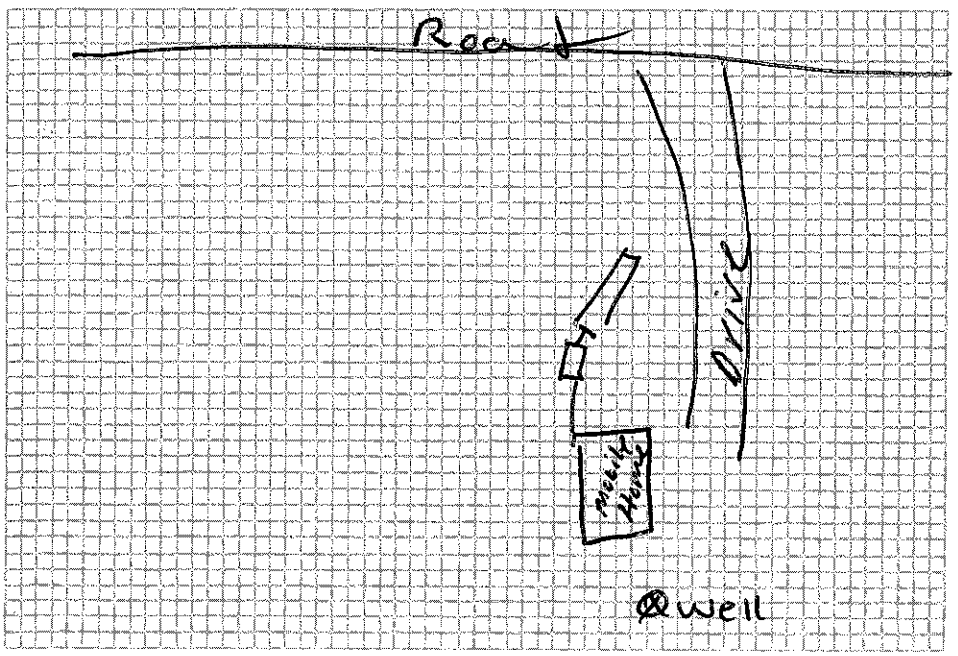
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1½

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

Lot Area 3/4 acre

Character & Porosity of Soil _____
Percolation Rate _____
Topography Existing System
Depth to Water Table _____
Rock or other impervious formations _____



Plot of System

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

Installed by Plato Duckworth
1972

IMPROVEMENTS PERMIT BY _____

COMMENTS: System was functioning properly at time of inspection.

CERTIFICATE OF COMPLETION BY P. C. Moore DATE 8-14-79

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