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 Paul T. Summerville DATE 8-8-79 PERMIT NO. 236

PHONE: Business _____ Home _____

LOCATION 150 W, TR on 1438 TR on 1450 - ¼ mi. T-L on Hermance Dr. at end on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 276 SECTION OR BLOCK NO. 11

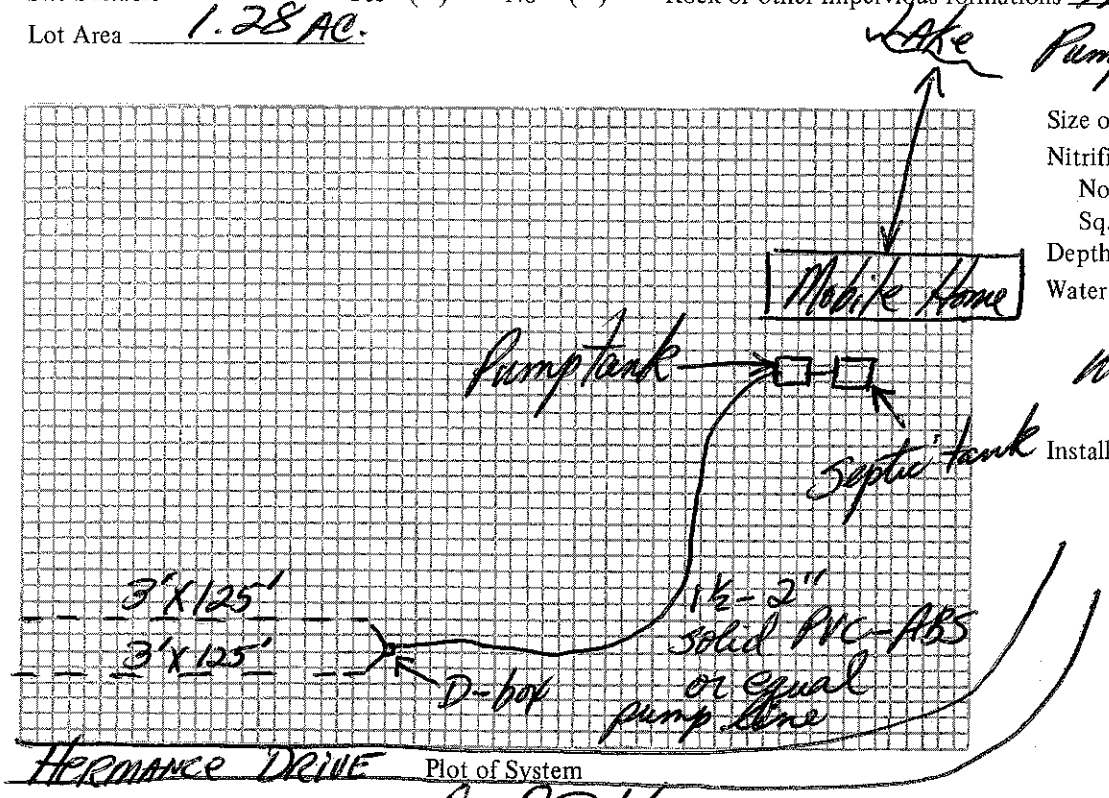
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 1.28 AC.

Character & Porosity of Soil Clay loam
Percolation Rate 80 mpi
Topography 15-25%
Depth to Water Table 10'+
Rock or other impervious formations none obs.



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 250 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )
Well next Door

Installed by _____

IMPROVEMENTS PERMIT BY David R. Henson

COMMENTS: Pump to be installed and working before approval can be given.

CERTIFICATE OF COMPLETION BY _____ DATE _____

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