4628-92-4421

10721

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 William Turner DATE April 11, '90 PERMIT NO 2N-3-A-260

PHONE: Business _____ Home _____

LOCATION 150 W TR 1438 (Waddell Rd.) TR 1450 (Hermitage) TR 1451 (Golden Pond) at end on left S. R. No. _____

SUBDIVISION NAME CLET LAKE NORMAN LOT NO. 260 SECTION OR BLOCK NO. 4

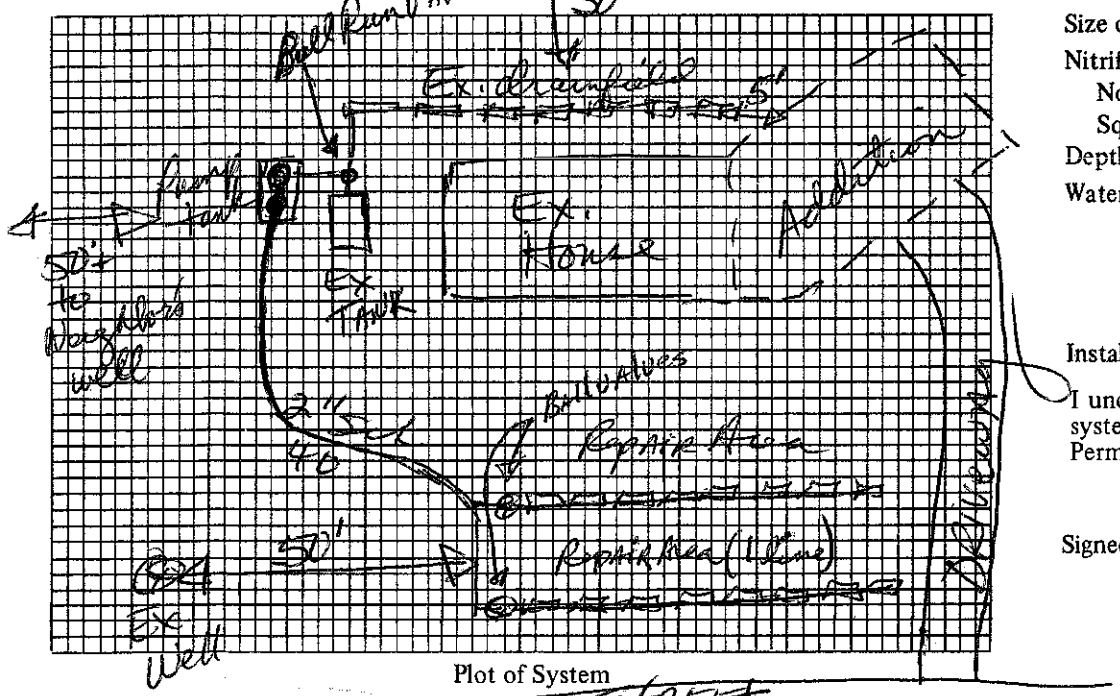
House (✓) Mobile Home ( ) Business ( ) Other Addition w/ Addn

No. Bedrooms 3 No. Bathrooms 2-3

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay / Sap. Cant.
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	#2-3
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	15-25% Terraced
Site Suitable	Yes ( )	No ( )	Depth to Water Table	3½'+
			Rock or other impervious formations	some scattered rocks / landscap.

Lot Area Existing 1000 pt

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Size of Tank Existing Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. _____ Linear Ft. 130'
Depth of Stone in Lines 16" + 6"

Water Supply: Individual (✓) panels pressure closed
Public ( )

Installed by J. R. Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Alarm tested & working but not yet permanently mounted.

Operation permit

CERTIFICATE OF COMPLETION BY D. R. Hinson, EHS DATE 4-11-90

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