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 Bill Turner DATE 5-21-81 PERMIT NO. 146

PHONE: Business _____ Home _____

LOCATION 150 W SR 1438 SR 1450 SR 1451 at end on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 260 SECTION OR BLOCK NO. 11

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

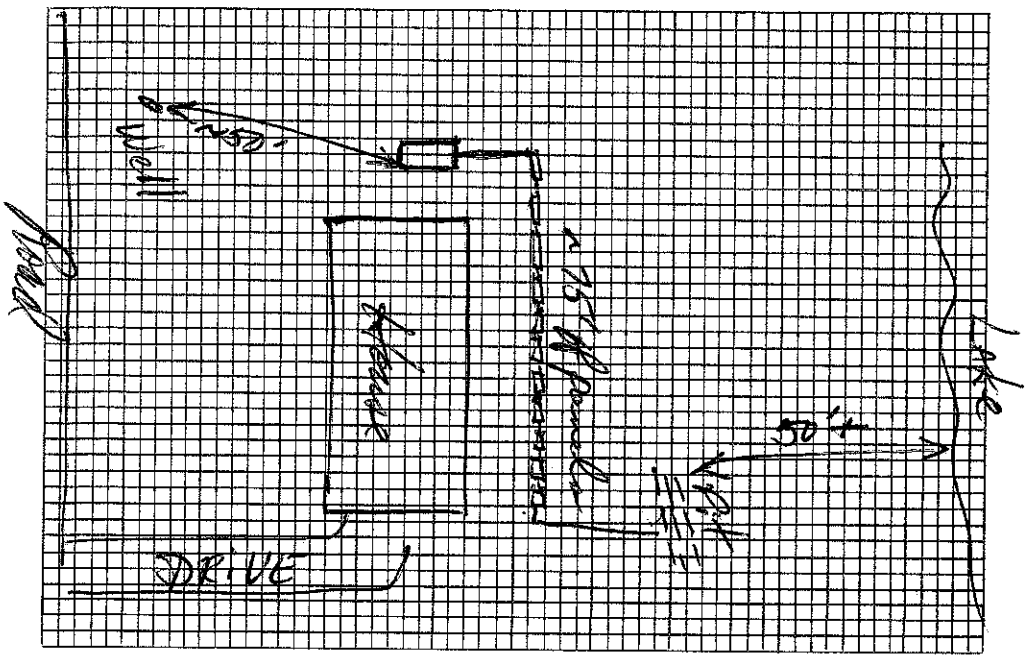
No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil Loamy p.m.
Percolation Rate 30 mpi
Topography 15-25%
Depth to Water Table unk
Rock or other impervious formations none obs.

Lot Area 20,000 sq ft +

✓ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 1
Sq. Ft. _____ Linear Ft. 75' of
Depth of Stone in Lines gravel

Water Supply: Individual ( )
Public ( )

Installed by Robert Hoke

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

Signed: _____

IMPROVEMENTS PERMIT BY RWI & JHC

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Mark R. Hinson DATE 5-21-81

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