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 Tom Davis DATE 6-9-75 PERMIT NO. 118

PHONE: Business _____ Home 664-2257

LOCATION 150 west TL on 1438 TR on 1456 TL on 1451 at end

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

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

Putting two trailer together to make 1 residence

No. Bedrooms _____ No. Bathrooms _____

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

Lot Area 1 acre

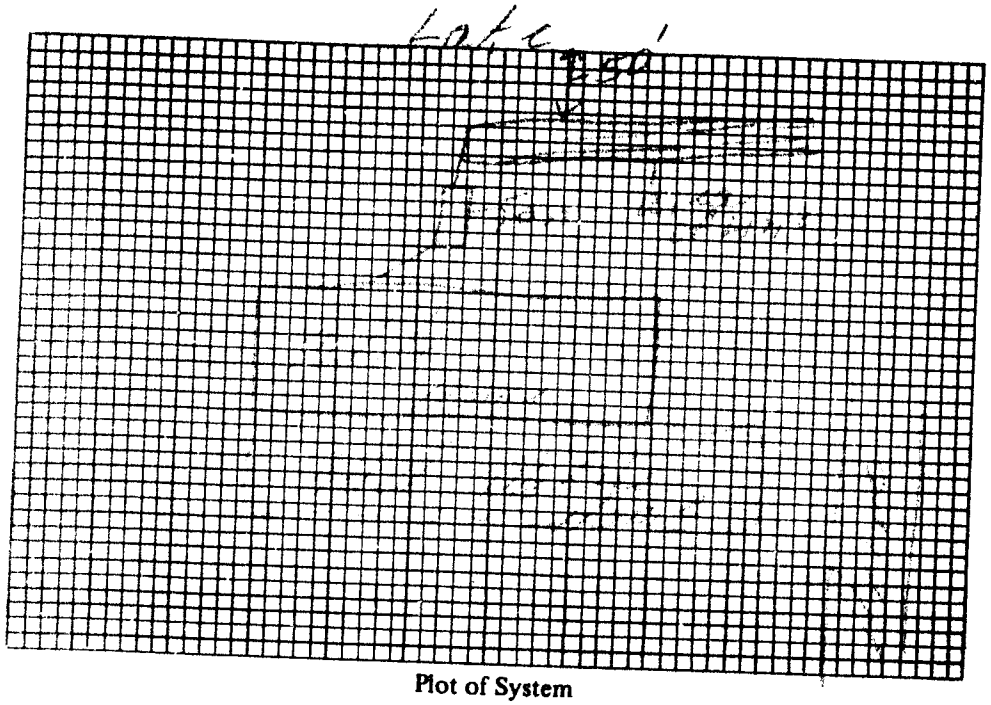
Character & Porosity of Soil Existing System

Percolation Rate _____

Topography _____

Depth to Water Table _____

Rock or other impervious formations _____



Plot of System

Size of Tank Existing System Gals.

Nitrification Field:

No. of Lines _____

Sq. Ft. _____ Linear Ft. _____

Depth of Stone in Lines _____

Water Supply: Individual ( )

Public ( )

Installed by _____

Installed 8 yrs ago

IMPROVEMENTS PERMIT BY _____

COMMENTS: System Working at Time of Site Inspection

CERTIFICATE OF COMPLETION BY John Sanderson DATE 6-9-75

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