4628935585

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 Walter Giles DATE 11-8-85 PERMIT NO. 484

PHONE: Business _____ Home _____

LOCATION 150W TR 1438 TR Hemmick Lane (1450) Attend on R S. R. No. _____

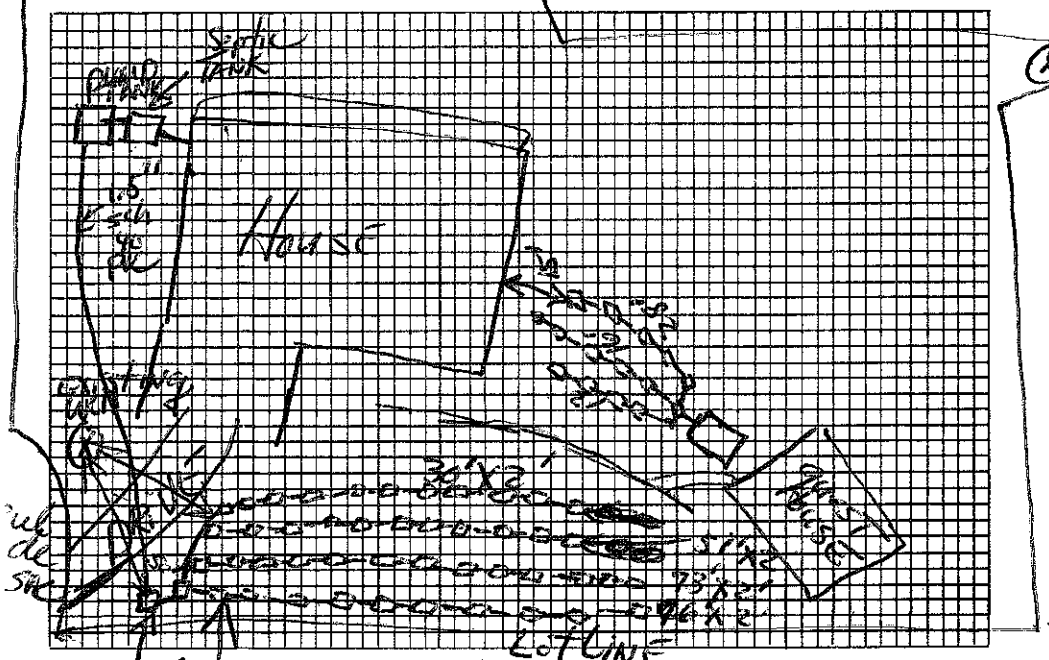
SUBDIVISION NAME Lake Norman Club LOT NO. 299 SECTION OR BLOCK NO. 11

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

No. Bedrooms 3 No. Bathrooms 2-3

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Silty-loam-gravel	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	0.2-0.3 gal/ft²/day	
Auto. Wash. Machine	Yes (X)	No ( )	Topography	~25%	
Site Suitable	Yes (X)	No ( )	Depth to Water Table	3'+	
Lot Area 0.62 ACRES			Rock or other impervious formations	24"+	

(X) Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement



Plot of System

Size of Tank 1500 Gals. w/baffle

Nitrification Field: 4 1000gal pump

No. of Lines 4 Linear Ft. 228 LFT

Depth of Stone in Lines 16" T+J

Water Supply: Individual (X) Public ( )

Installed by F. J. Ervin Co.

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

Signed: _____

for guest house 1000gal septic 56 LFT 16" panels

75 gal water box 50'

IMPROVEMENTS PERMIT BY O. R. Hinson

COMMENTS Installed as many panels as space would permit. Additionally, used 1½" PVC from pump TANK (1 line from tank to water box)

CERTIFICATE OF COMPLETION BY Paul Clement Kelly Sheets DATE 11-8-85

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