IREDELL COUNTY HEALTH DEPARTMENT 4628989360

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System — G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR S. J. Willard DATE 2-25-82 PERMIT NO. 27

PHONE: Business _____ Home _____

LOCATION 150W TR 1303 TR 1300 near end of Road TR Charles Lowe ONR S. R. No. 15

SUBDIVISION NAME Lake Norman LOT NO. 115 SECTION OR BLOCK NO. _____

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

No. Bedrooms 2 No. Bathrooms 3

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Loamy loam
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate	30 min/in
Auto. Wash. Machine	Yes (X)	No ( )	Topography	15-25%
Site Suitable	Yes (X)	No ( )	Depth to Water Table	Unknown
			Rock or other impervious formations	None observed

Lot Area ~3/4 ACRE

X Basement with Plumbing ____ Basement without Plumbing ____ No Basement

EXISTING

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 750 Linear Ft. 750
Depth of Stone in Lines 16"

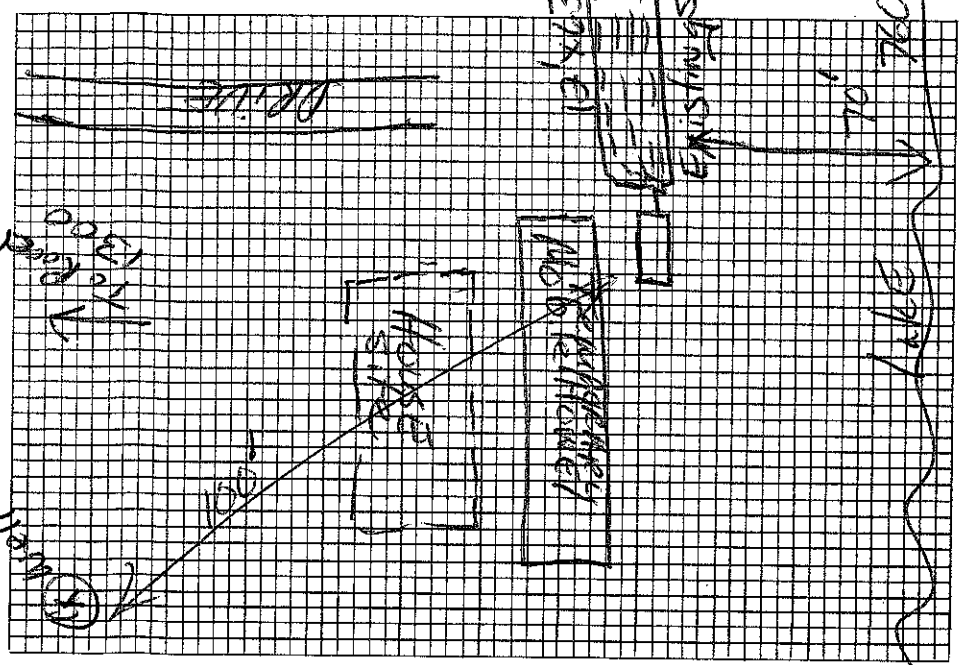
Water Supply: Individual (X)
Public ( )

4-11-80

Installed by Donald Lockey

I understand and agree to install septic tank system as specified on this Improvements Permit. checked by Fred Clemmer 4-14-80

Signed: _____



Plot of System

IMPROVEMENTS PERMIT BY David Hinson

COMMENTS: Existing system working at date of inspection Owner must Remove Mobile Home from lot before final building inspection Approval can be given

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 2-25-82

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