P.O. Box 571
Cornelius, NC
28031

4637013828

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 Don C. Mothern DATE 12-21-84 PERMIT NO. 470

PHONE: Business _____ Home _____

LOCATION 400 TR 1178 TR 1443 0.7 mile TR Brady Sign 2nd lot on R S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 521 SECTION OR BLOCK NO. 9

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

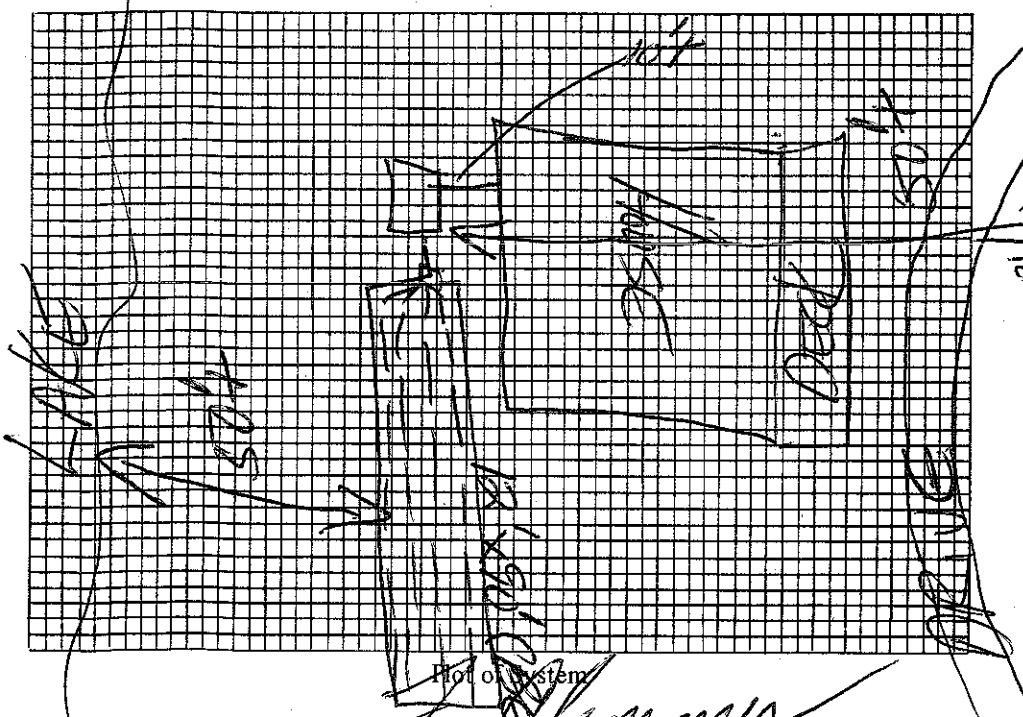
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area .77 Acre

Character & Porosity of Soil Clay loam 4 deg
Percolation Rate 10-30 min
Topography
Depth to Water Table
Rock or other impervious formations None obs.

X Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 4
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"
Water Supply: Individual (X)
Public ( )

John Bernhardt

Installed by Piney Grove Septic Tank

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

Signed: _____

IMPROVEMENTS PERMIT BY T. Clemmer

COMMENTS: System About 4' deep

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: T. Clemmer DATE 12-21-84

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

3.00

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 Don C. Mottern DATE 7-27-84 PERMIT NO. 204

PHONE: Business _____ Home _____

LOCATION 400 TR 1478 TL 1443 0.7 mile (TR Brady Sign) Left Lot on R

SUBDIVISION NAME Crescent Road Hyman S. R. No. _____

LOT NO. 1521 SECTION OR BLOCK NO. _____

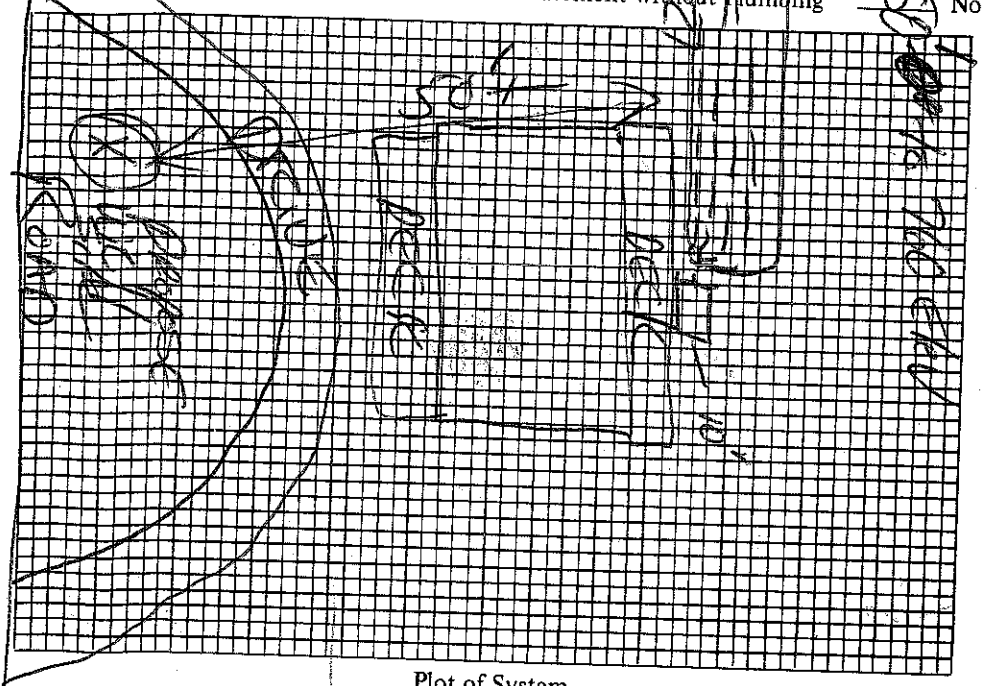
House (X) Mobile Home ( ) Business ( ) Other ( )

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No X	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes X	No ( )	Percolation Rate	0.6 gpd/ft²/day
Auto. Wash. Machine	Yes X	No ( )	Topography	2-10%
Site Suitable	Yes X	No ( )	Depth to Water Table	4'
			Rock or other impervious formations	None obs

Lot Area .77 ACRE

X Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 4
Sq. Ft. 1080 Linear Ft. 360
Depth of Stone in Lines 12"

Water Supply: Individual X
Public ( )

Installed by _____

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

Signed: X D C Mottern

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Keep system shallow, follow contours

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

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Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold