IREDELL COUNTY HEALTH DEPARTMENT 4637 13 0554

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

OWNER OR CONTRACTOR Forrest McMoun DATE 4-13-83 PERMIT NO. 90

PHONE: Business _____ Home _____

LOCATION 1100 TR 1178 TR 1240 1st Lot on left Pattemore

SUBDIVISION NAME Lake Norman LOT NO. 147 SECTION OR BLOCK NO. 9 S. R. No. _____

House (X) Mobile Home ( ) Business ( ) Other Addition - 3BR total

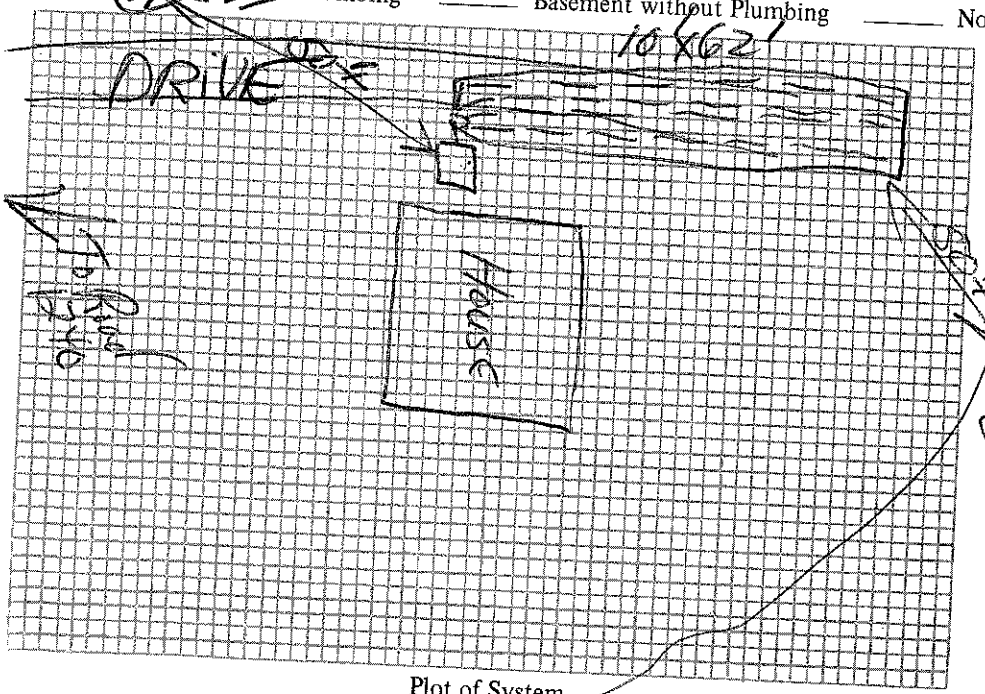
No. Bedrooms 3 No. Bathrooms 2

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

Lot Area Existing Lot Line

Character & Porosity of Soil _____
Percolation Rate _____
Topography Existing System
Depth to Water Table _____
Rock or other impervious formations _____

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



Size of Tank Existing Gals.
Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines _____
Water Supply: Individual (X)
Public ( )

2-26-76
Installed by T. J. Erwin Co.

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

Signed: _____

System checked 2-26-76 by John Houston

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing System working OK At date of inspection; Owner using maybe 50 ft of drain field due to drive way over System

CERTIFICATE OF COMPLETION BY _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS. DATE 4-13-83

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