4637137303

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 Al Lessor DATE 3-26-22 PERMIT NO. 47

PHONE: Business _____ Home 545-4735

LOCATION 1100 TP on 1178 TP on 1240 S of Lot on Left

S. R. No. _____

SUBDIVISION NAME Lake Norman (CL+T) LOT NO. 153 SECTION OR BLOCK NO. 9

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

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area 1 Acre +/-

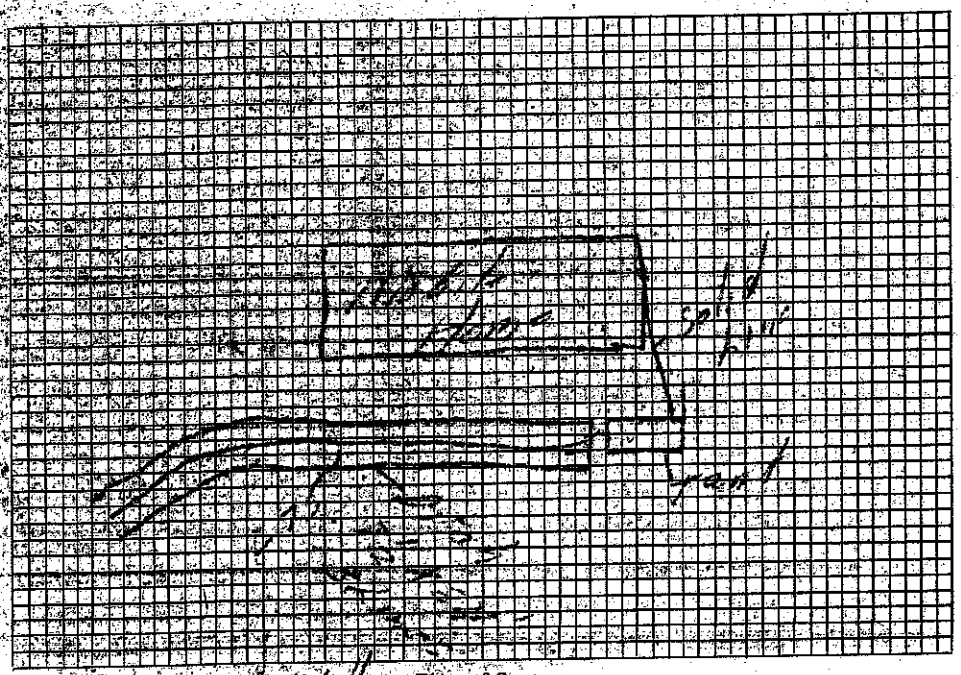
Character & Porosity of Soil Sandy Clay Loam Fair

Percolation Rate Soil Borings

Topography 2-8% Slope

Depth to Water Table 10-14

Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 16

Water Supply: Individual (✓)
Public ( )

Installed by Burton Grading

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John Houston DATE 3-22-22

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

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 [illegible] DATE 1-12-22 PERMIT NO. 5

PHONE: Business _____ Home 565-4235

LOCATION [illegible]

S. R. No. _____

SUBDIVISION NAME Lake Norman (CL+T) LOT NO. 153 SECTION OR BLOCK NO. 9

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

No. Bedrooms 2 No. Bathrooms 1

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area [illegible] Lake

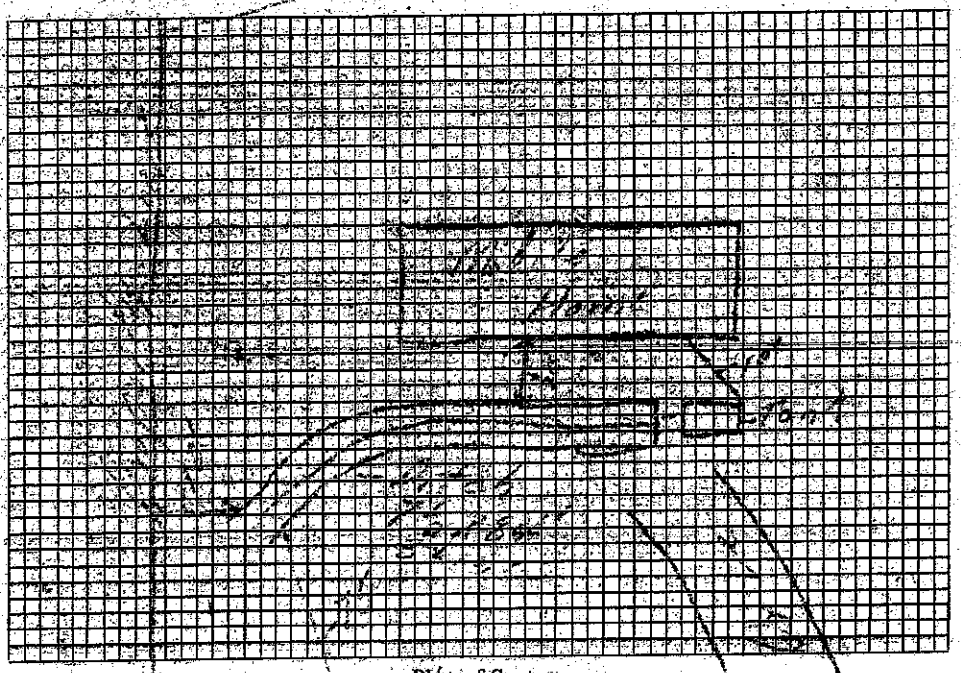
Character & Porosity of Soil Sandy Clay Loam Gravel

Percolation Rate [illegible]

Topography 2 to 5%

Depth to Water Table 2'

Rock or other impervious formations None



Plot of System

Size of Tank 1250 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 625 Linear Ft. 350

Depth of Stone in Lines 24"

Water Supply: Individual (✓)

Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY [illegible]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE _____

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