4637308890

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 Alan C Walters DATE July 4 '18 PERMIT NO. 153

PHONE: Business _____ Home _____

LOCATION 1110 T.R. on N. 115 T.R. on 3rd on left

S. R. No. _____

SUBDIVISION NAME Ft. Norman LOT NO. 124 SECTION OR BLOCK NO. 2

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

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit Yes ( ) No (✓)

Auto. Dishwasher Yes ( ) No (✓)

Auto. Wash. Machine Yes (✓) No ( )

Site Suitable Yes (✓) No ( )

Lot Area 1 ac.

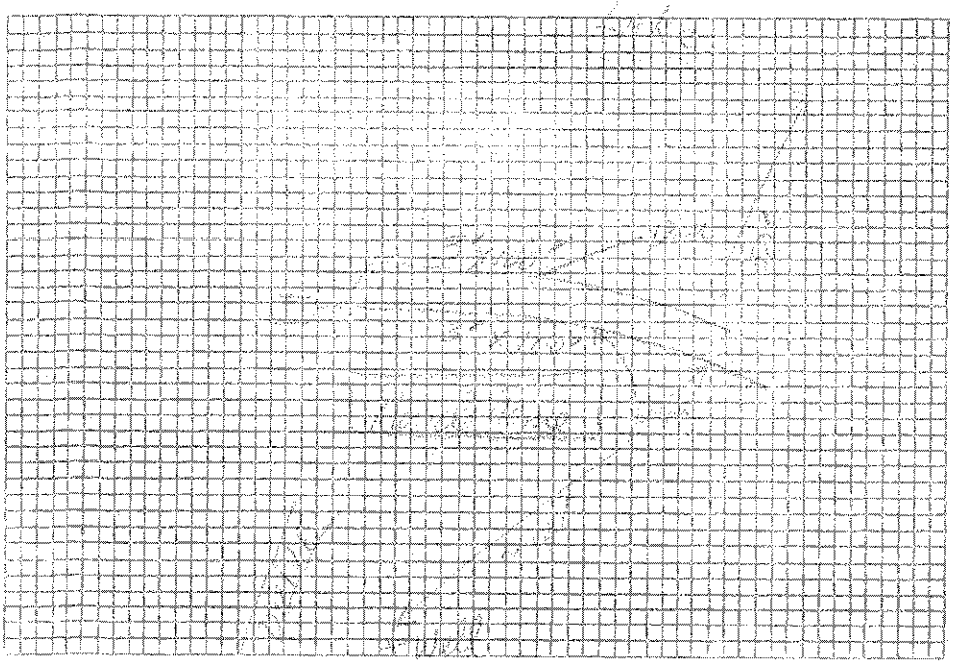
Character & Porosity of Soil Sandy Clay Loam

Percolation Rate 2

Topography Hilly

Depth to Water Table 6'+

Rock or other impervious formations none rec.



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 2

Sq. Ft. 600 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by F. J. Levin

IMPROVEMENTS PERMIT BY D. Hinton

COMMENTS: Trench to be installed on level line to begin at 10' of 100'.

CERTIFICATE OF COMPLETION BY Wendell Brown DATE July 11

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

9:30

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 Ben D Mathis DATE 6-21-22 PERMIT NO. 163

PHONE: Business _____ Home 872-5916

LOCATION Hwy 70 Pow 115 Pow 12 Mi on and on L on _____ S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 184 SECTION OR BLOCK NO. 9

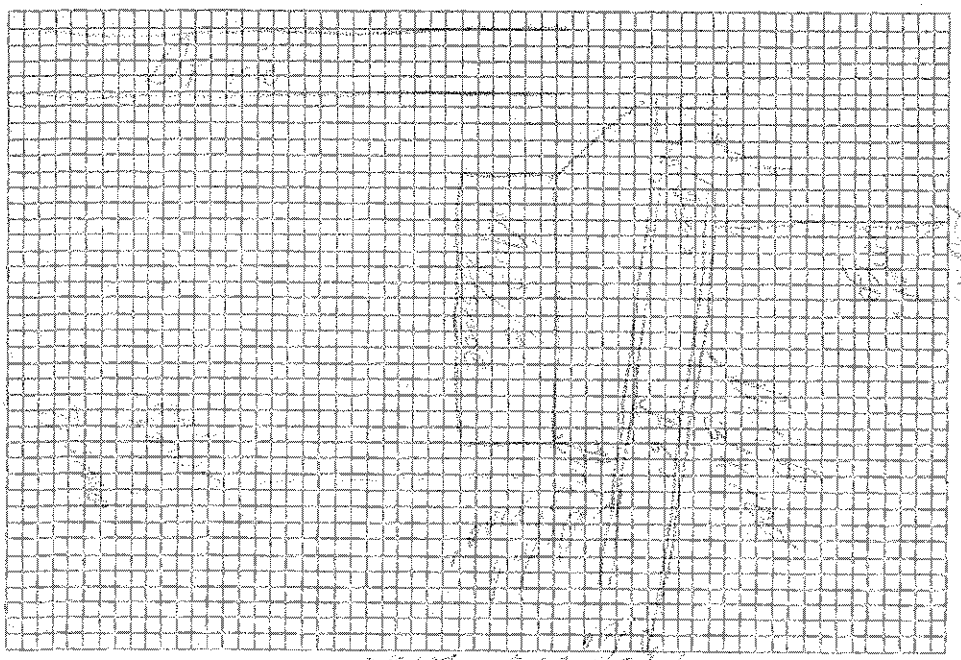
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area _____

Character & Porosity of Soil Clay loam
Percolation Rate 60 min/in
Topography Slight
Depth to Water Table 24"
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 1
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Septic to be installed per site plan

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