07253 11:00

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 Richard Camery DATE 8-17-87 PERMIT NO.

PHONE: Business ______ Home ______

LOCATION 1303 N, TL 1300 (Fern Hill Rd.) near end on left (just past 2nd Brockway Lane) S. R. No. ______

SUBDIVISION NAME CL&T Lake Norman LOT NO. 1009 SECTION OR BLOCK NO. 15

50' to well

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 near road Yes (✓) No ( )

Lot Area 1Ac +

Character & Porosity of Soil P.S. Clay

Percolation Rate 2-4

Topography PS near road 4-8%

Depth to Water Table 4'+

Rock or other impervious formations none obs.

✓ Basement with Plumbing ______ Basement without Plumbing ______ No Basement

1000 gal pump tank

Size of Tank 1000 Gals.

Nitrification Field:

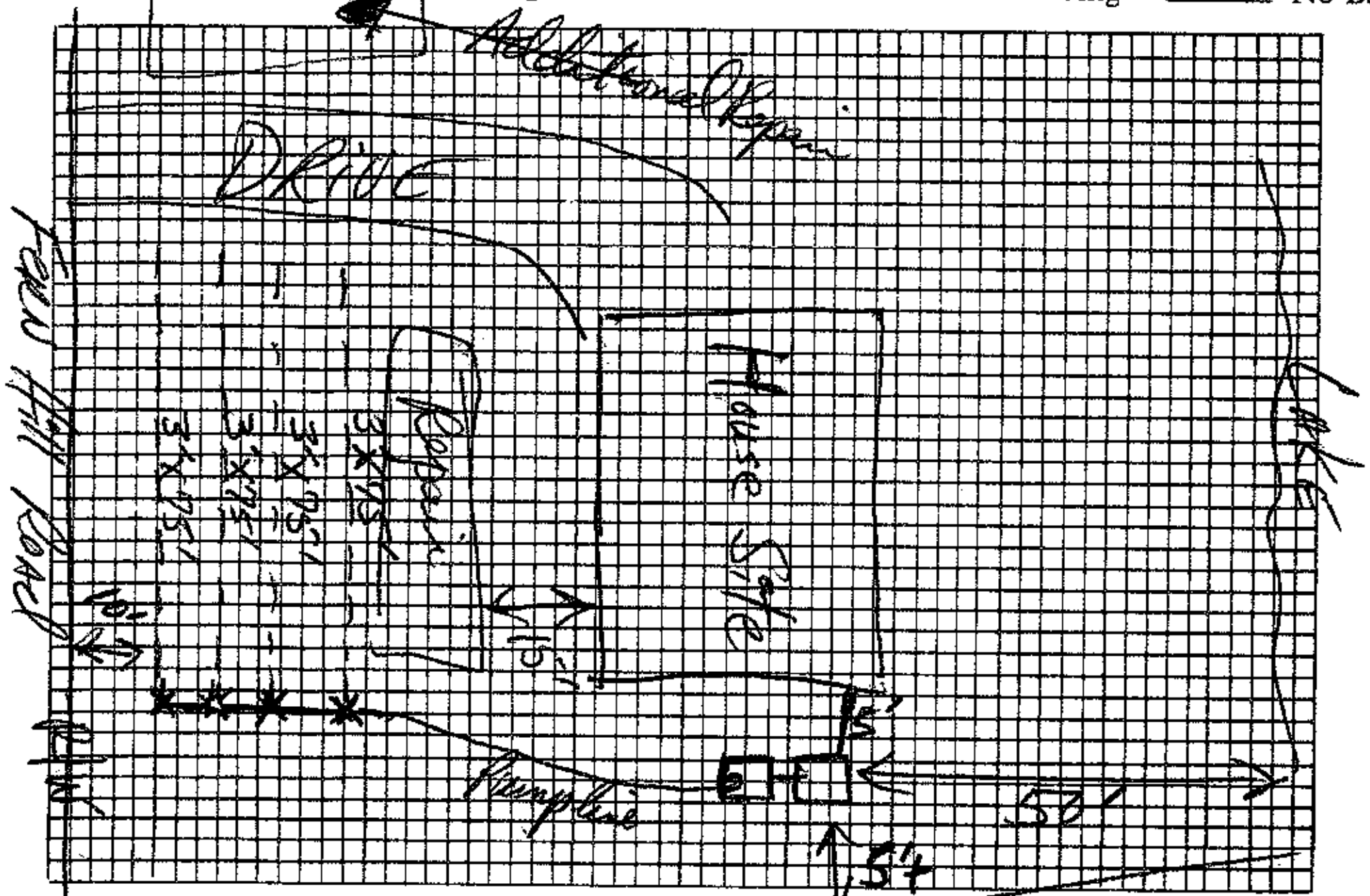
No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )



Plot of System

Installed by ______

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

Signed X On file

A) Distance requirements are maintained
B) Tanks are not under driveway

Well to be located accordingly.

IMPROVEMENTS PERMIT BY David R. Hinson, R.S.

COMMENTS: Keep drainfield out of gullied areas. OK to locate tanks on other side of house if Dose conventional field by using a ball valve at the head of each ditch and a 1½" pvc pipe down the center with one 5/32" hole drilled every 5 feet (2 feet of head ditch). Repair Area (100%) across drive.

CERTIFICATE OF COMPLETION BY ______ DATE ______

EXISTING SYSTEM CHECKED BY: ______ DATE ______

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