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 Earl Lackey DATE 6-3-22 PERMIT NO. 145

PHONE: Business _____ Home _____

LOCATION SR 1488 Lot on left

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 83 SECTION OR BLOCK NO. 11

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

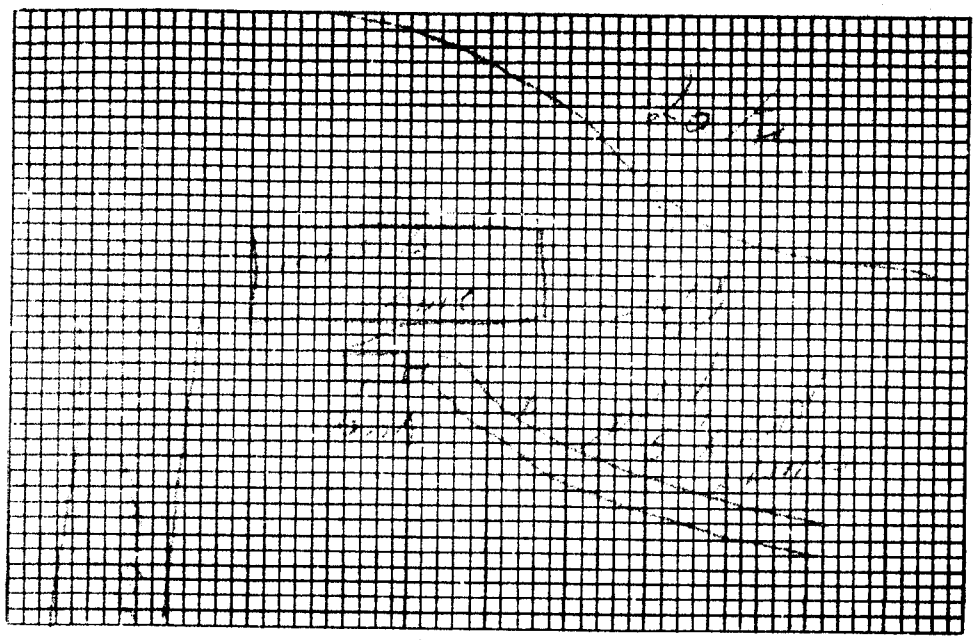
Character & Porosity of Soil Sandy Clay Loam Good

Percolation Rate 60 min/in

Topography 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 2
Sq. Ft. 500 Linear Ft. 200
Depth of Stone in Lines 20"

Water Supply: Individual (✓)
Public ( )
well next door

Installed by E J Erwin

IMPROVEMENTS PERMIT BY J C Ware

COMMENTS: _____

CERTIFICATE OF COMPLETION BY John Hawkins DATE 5-24

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