4638179426

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 J. R. Martin DATE 3-12-85 PERMIT NO. 80

PHONE: Business ______ Home ______

LOCATION Perth Rd (1303) TL on Fernhill Church Rd go past the Church take 3rd left past the Church Kenway Lp (2nd) TR on dirt Road 3rd house on R S. R. No. ______

SUBDIVISION NAME Lake Norman LOT NO. 64 SECTION OR BLOCK NO. 25

House (X) Mobile Home ( ) Business ( ) Other adding out building

No. Bedrooms E No. Bathrooms ______ Existing

Garbage Disposal Unit Yes ( ) No ( )

Auto. Dishwasher Yes ( ) No ( )

Auto. Wash. Machine Yes ( ) No ( )

Site Suitable Yes ( ) No ( )

Lot Area 20,000 ft²

Character & Porosity of Soil ______

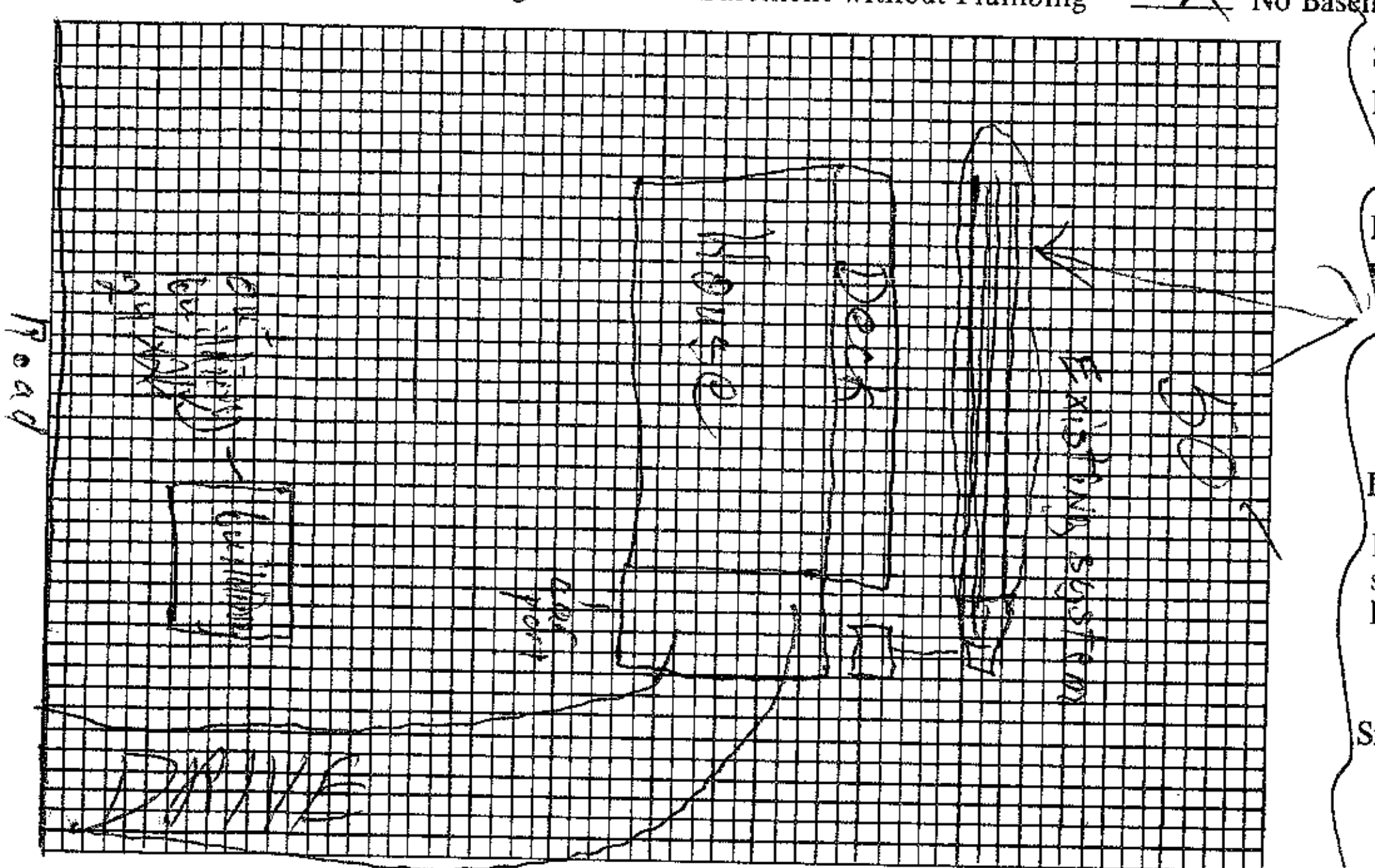
Percolation Rate ______ Existing

Topography ______

Depth to Water Table ______

Rock or other impervious formations ______

______ Basement with Plumbing ______ Basement without Plumbing X No Basement



Plot of System

Size of Tank E Gals.

Nitrification Field: Existing

No. of Lines ______

Sq. Ft. ______ Linear Ft. ______

Depth of Stone in Lines ______

Water Supply: Individual ( )

Public ( )

Installed by ______

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

Signed: ______

IMPROVEMENTS PERMIT BY ______

COMMENTS: Existing system working OK at date of inspection, out building location is far enough away from the tank & lines (10')

CERTIFICATE OF COMPLETION BY ______ DATE ______

EXISTING SYSTEM CHECKED BY: Charles K. Barnett DATE 3-12-85

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