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. W. Brown DATE 7-2-80 PERMIT NO. 192

PHONE: Business _____ Home _____

LOCATION 150 W TR 1396 ~ 1/2 mile lot at end on cul de sac on left S. R. No. _____

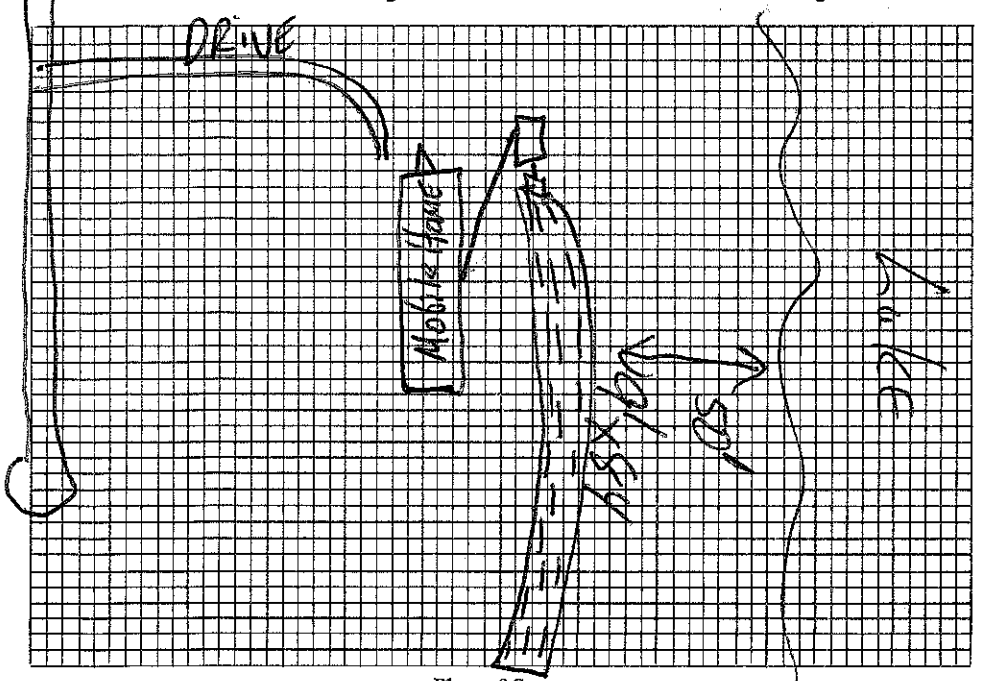
SUBDIVISION NAME Lake Norman LOT NO. 170 SECTION OR BLOCK NO. 11

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

No. Bedrooms	3	No. Bathrooms	2		
Garbage Disposal Unit	Yes ( )	No	(X)	Character & Porosity of Soil	Clay loam
Auto. Dishwasher	Yes (X)	No	( )	Percolation Rate	30 min
Auto. Wash. Machine	Yes (X)	No	( )	Topography	15 to 20%
Site Suitable	Yes (X)	No	( )	Depth to Water Table	unknown
				Rock or other impervious formations	NONE observed

Lot Area ~3/4 Acre

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 3
Sq. Ft. 750 Linear Ft. 250
Depth of Stone in Lines 16"

Water Supply: Individual (X)
Public ( )
Neighbor's well

Installed by J. R. Bowles

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

Signed: _____

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Fred Clemmer DATE 7-2-80

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