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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 Alanson Hinman DATE 11-10-86 PERMIT NO. 597

PHONE: Business _____ Home _____

LOCATION 150W TR Perth Rd TL on Fernhill Church Rd TL on the 2nd Kenway Loop TR on the 1st road on your Right 1st house on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 59 SECTION OR BLOCK NO. 15

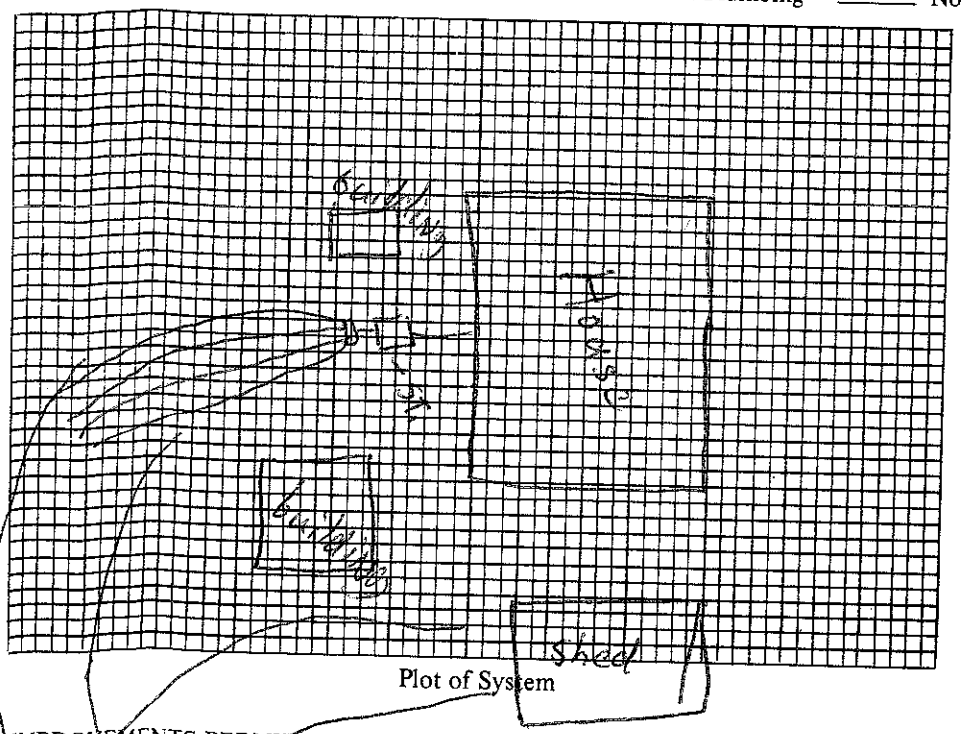
House (✓) Mobile Home ( ) Business ( ) Other adding shed

No. Bedrooms _____ No. Bathrooms _____

Garbage Disposal Unit	Existing	Yes ( )	No ( )	Character & Porosity of Soil _____
Auto. Dishwasher		Yes ( )	No (✓)	Percolation Rate _____
Auto. Wash. Machine		Yes (✓)	No ( )	Topography Existing
Site Suitable		Yes ( )	No ( )	Depth to Water Table _____
				Rock or other impervious formations _____

Lot Area _____

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement



Plot of System

Size of Tank Existing 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; adding a shed

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Charles L. Barnett R.S. DATE 11-10-86

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