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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 Claude Horne DATE 4-2-04 PERMIT NO. 69

PHONE: Business _____ Home _____

LOCATION Perth Road North Statesville 150 To on Rt 90

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 54 SECTION OR BLOCK NO. 15

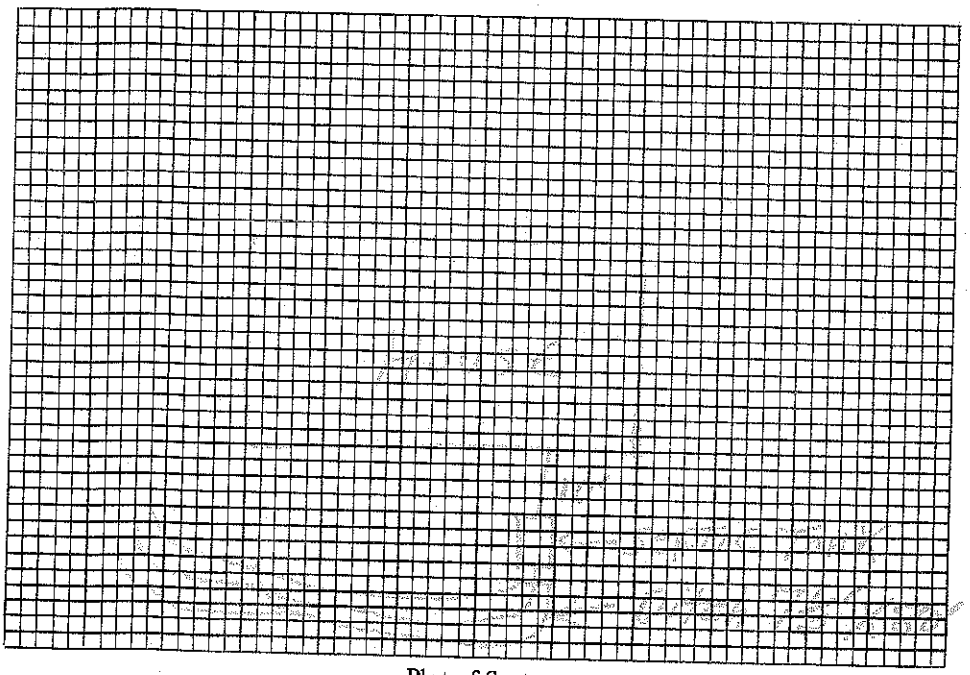
House (✓) Mobile Home ( ) Business ( ) Other _____

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 Large

Character & Porosity of Soil Cecil Appling Soil Type (Brassy Good)
Percolation Rate Not to Use
Topography level to 2% slope
Depth to Water Table 10'
Rock or other impervious formations none



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 5
Sq. Ft. 500 Linear Ft. 340
Depth of Stone in Lines 10"
Water Supply: Individual (✓)
Public ( )

Installed by Allison

IMPROVEMENTS PERMIT BY J. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY J. C. Moore DATE 4-30-04

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