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 Dr. Henry S Wilkie DATE 2-24-[illegible] PERMIT NO. [illegible]

PHONE: Business _____ Home 662 2029

LOCATION 150 W to on 13c [illegible]
TR on Bonnie Dr at end S. R. No. 1

SUBDIVISION NAME Lake Norman LOT NO. 103 SECTION OR BLOCK NO. _____

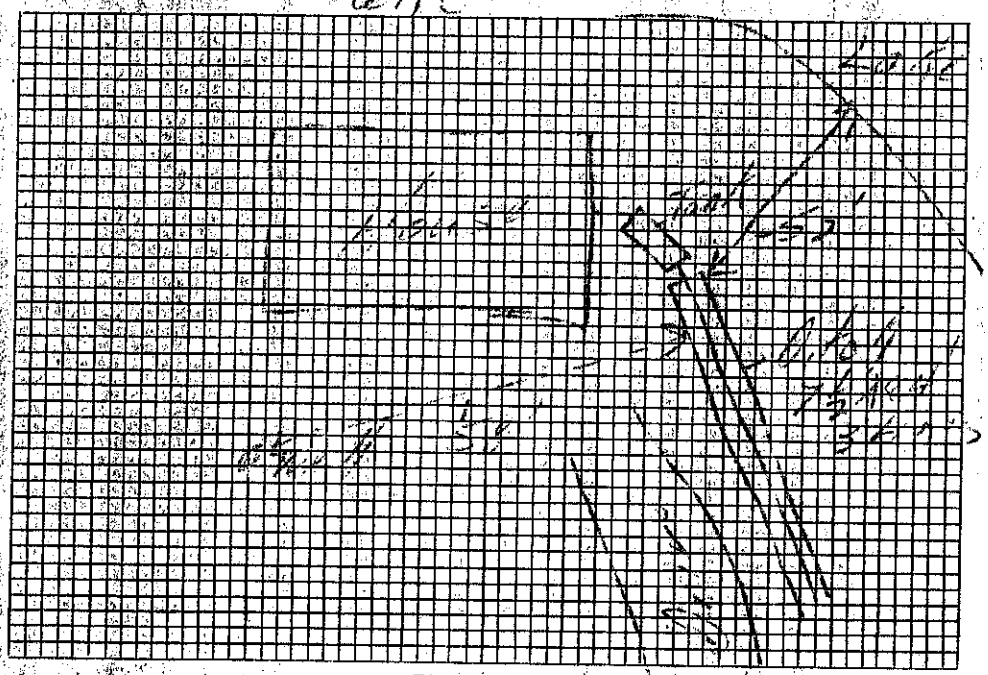
House (✓) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes	(✓)	No	( )	
Auto. Dishwasher	Yes	(✓)	No	( )	
Auto. Wash. Machine	Yes	(✓)	No	( )	
Site Suitable	Yes	(✓)	No	( )	

Character & Porosity of Soil [illegible]
Percolation Rate [illegible]
Topography [illegible]
Depth to Water Table [illegible]
Rock or other impervious formations [illegible]

Lot Area [illegible]



Plot of System

Size of Tank 1250 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines [illegible]
Water Supply: Individual (✓)
Public ( )

Installed by [illegible]

Carl Stewart

Lot 103
Sec 11

IMPROVEMENTS PERMIT BY [illegible]

COMMENTS: _____

CERTIFICATE OF COMPLETION BY [illegible] DATE [illegible]

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