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 William E. Smith DATE 10-21-00 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 1302 North Dr. on 1128 Statesville

Right S. R. No. 1128

SUBDIVISION NAME Lake Norman LOT NO. 91 SECTION OR BLOCK NO. 11

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

No. Bedrooms 4 No. Bathrooms 3

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

Lot Area 2 Acre

Character & Porosity of Soil Sandy clay loam

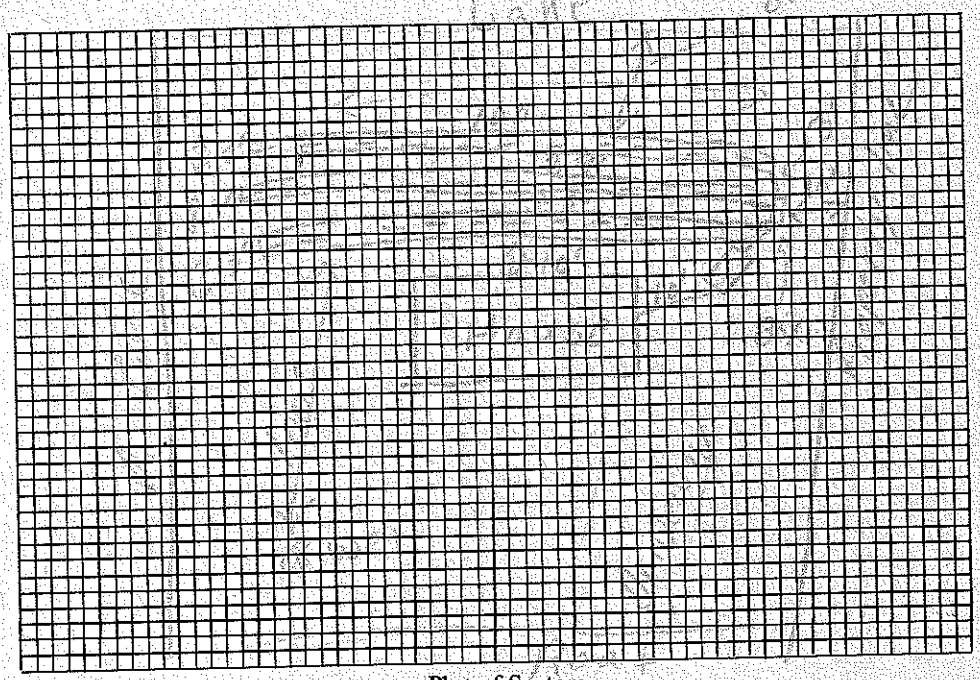
Percolation Rate 45 min/inch

Topography Sloping to lake level

Depth to Water Table 2' to lake level

Rock or other impervious formations none

Lake over Soil



Plot of System

Size of Tank 1500 Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 300 Linear Ft. 300

Depth of Stone in Lines 1'

Water Supply: Individual ( )

Public ( )

Installed by _____

IMPROVEMENTS PERMIT BY H. C. Moore

COMMENTS: Run 3 separate lines across slope - Level

Distribution box at start - Have lines 3' from end

wall - Solid line from box to lines

CERTIFICATE OF COMPLETION BY _____ DATE _____

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