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 Tom Wallace DATE 1-30-26 PERMIT NO. _____

PHONE: Business _____ Home 537-7105

LOCATION 1203 N Ivy to Stamey Creek Rd Turn left Lot on left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 100 SECTION OR BLOCK NO. 1A

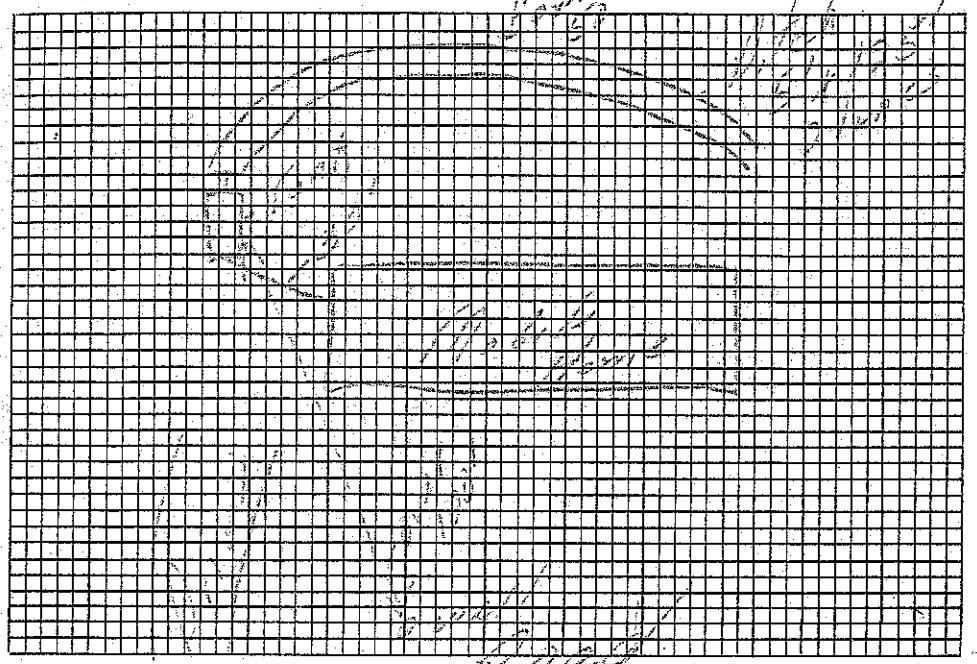
House ( ) Mobile Home (✓) Business ( ) Other _____

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 Clay loam Gravelly Good
Percolation Rate 45 min/inch
Topography 2% to 5% Slope
Depth to Water Table 18+
Rock or other impervious formations None

Lot Area 2+ acre



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 12"
Water Supply: Individual (✓)
Public ( )

Installed by SOP

IMPROVEMENTS PERMIT BY J C Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 1-30-26

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