09371

IREDELL COUNTY HEALTH DEPARTMENT 4638-64-3227

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Randy Byars DATE Oct 11, 89 PERMIT NO. 2P-4-A-68

PHONE: Business _____ Home _____

LOCATION 150W TR 1303 TL Normandy Rd. ¼-½ mile on Right

S. R. No. _____

SUBDIVISION NAME CLET Lake Norman LOT NO. 1088 SECTION OR BLOCK NO. 11

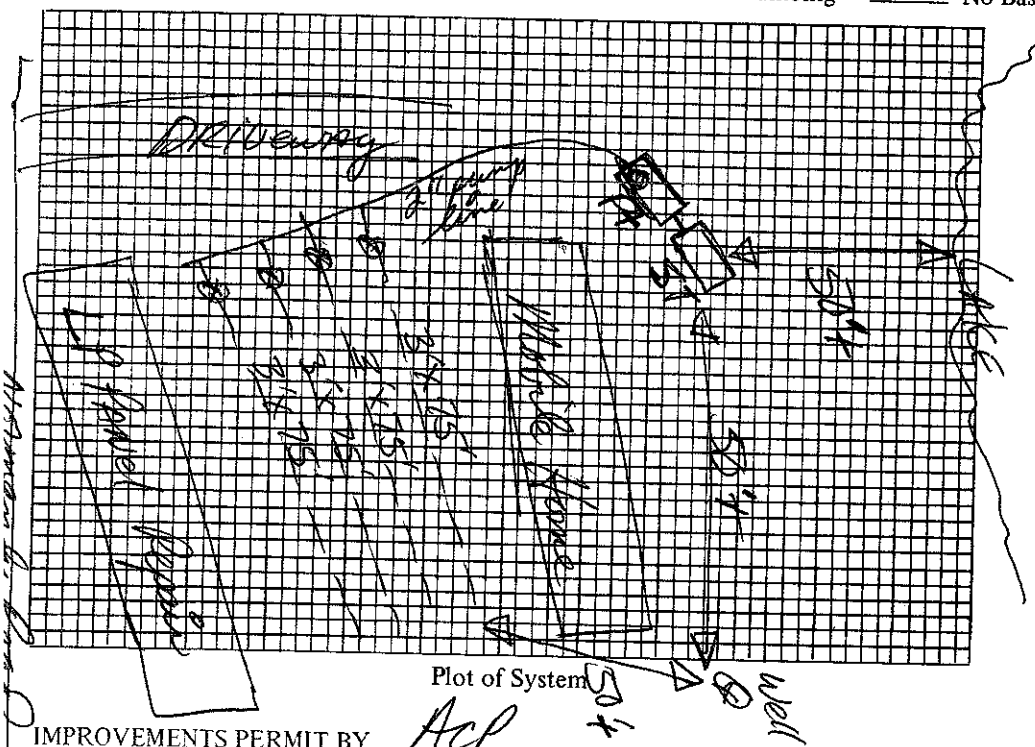
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil	clay
Auto. Dishwasher	Yes (✓)	No ( )	Percolation Rate	w. 4
Auto. Wash. Machine	Yes (✓)	No ( )	Topography	28%
Site ~~Suitable~~ PS	Yes (✓)	No ( )	Depth to Water Table	4+
			Rock or other impervious formations	none obs.

Lot Area 20000 ft²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



1000 gal.

Size of Tank 1000 Gals.

Nitrification Field:

No. of Lines 4

Sq. Ft. 900 Linear Ft. 300

Depth of Stone in Lines 12"

Water Supply: Individual (✓)

Public ( )

Installed by Wayne Dobson

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY ACP

COMMENTS: Well not down, Alarm checked & working but not mounted.

CERTIFICATE OF COMPLETION BY David R. Henson, R.S. DATE 10-16-89

EXISTING SYSTEM CHECKED BY: _____ DATE _____

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