4638-65-7947

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 Bill Trantham DATE 8-11-21 PERMIT NO. 217

PHONE: Business 704-880-4 Home _____

LOCATION 150 w to on Rt of Circle Rd
Come by the TL 1st on Left S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 43 SECTION OR BLOCK NO. 4

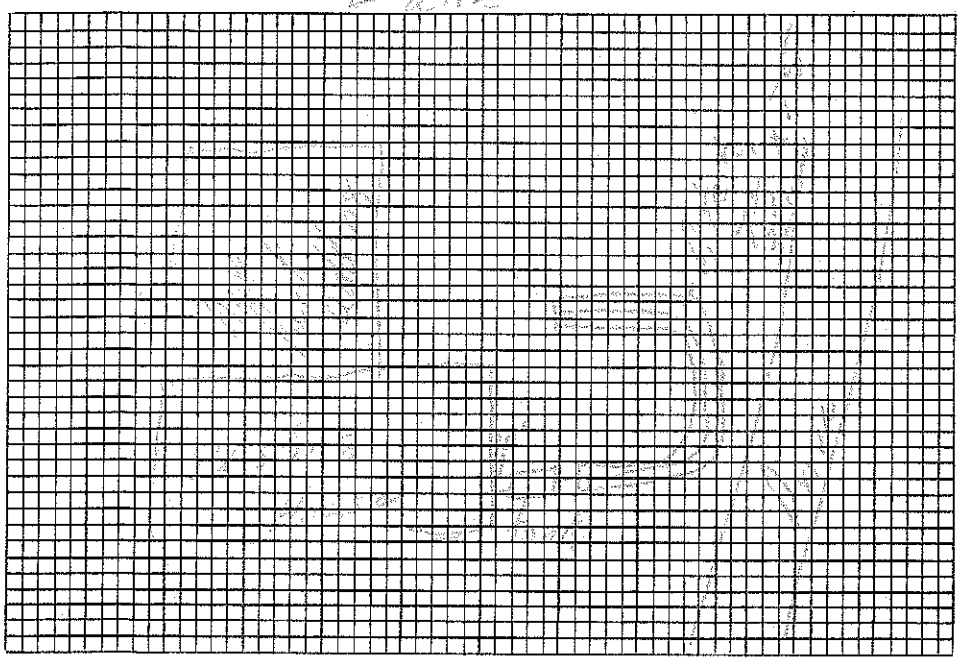
House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 3

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

Character & Porosity of Soil Existing System
Percolation Rate _____
Topography _____
Depth to Water Table _____
Rock or other impervious formations _____

Lot Area .39 acres



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 525 Linear Ft. 935
Depth of Stone in Lines 24
Water Supply: Individual ( )
Public ( )

Installed by _____
Jan 14 1926

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Jack Hunsucker DATE 8-11-21

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