4500

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 John Keith Rogers DATE 10-9-85 PERMIT NO. 348

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303, LAKE R 1452 (Dr Young Road) 3/4 Mi. on left S. R. No. _____

SUBDIVISION NAME LAKE NORMAN LOT NO. 48+49 SECTION OR BLOCK NO. 14

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

No. Bedrooms 3 No. Bathrooms 2

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

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

Lot Area Existing

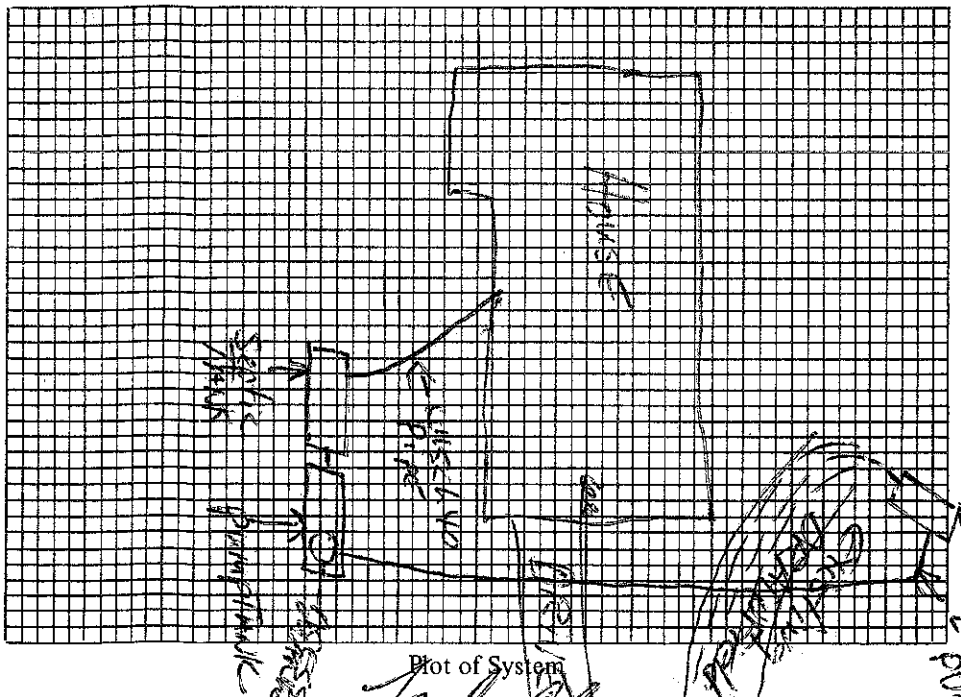
_____ Basement with Plumbing X Basement without Plumbing _____ No Basement

1000 gal Chamber Septic

Size of Tank 1250 Gals.

Nitrification Field:
No. of Lines Existing
Sq. Ft. _____ Linear Ft. _____
Depth of Stone in Lines Existing

Water Supply: Individual (X)
Public ( )



Plot of System

Installed by _____

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

Signed: John K. Rogers

IMPROVEMENTS PERMIT BY Fred Clemmer

COMMENTS: Use good quality effluent pump with 0.5 hp RATING; use separate Power Line for Alarm; Use Metal 4' box in Back Agreement To Pump Tank Access; grass over Drain Field

CERTIFICATE OF COMPLETION BY _____ DATE _____

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