4638673007

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 Theron Brown DATE 9-19-85 PERMIT NO. 410

PHONE: Business ____ Home ____

LOCATION 150 W TR 1303 TL 1301 TL 1st Rd to left stay left at forks at end on Right S. R. No. ____

SUBDIVISION NAME Lake Norman LOT NO. 61 SECTION OR BLOCK NO. 14

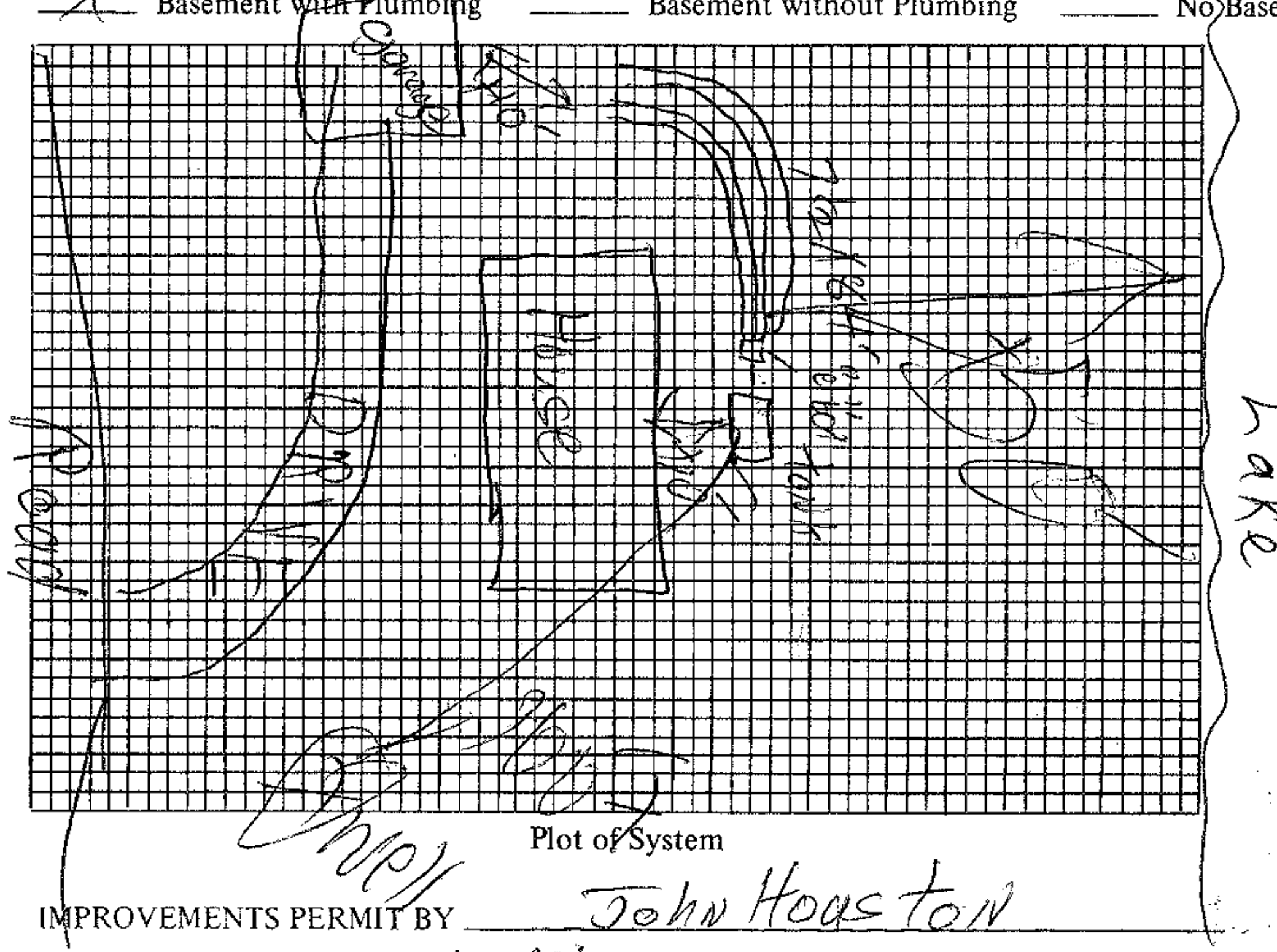
House (X) Mobile Home ( ) Business ( ) Other building (1 car garage)

No. Bedrooms ____ No. Bathrooms ____	Character & Porosity of Soil Existing
Garbage Disposal Unit Yes ( ) No ( )	Percolation Rate
Auto. Dishwasher Yes ( ) No ( )	Topography
Auto. Wash. Machine Yes ( ) No ( )	Depth to Water Table
Site Suitable Yes ( ) No ( )	Rock or other impervious formations

Existing

Lot Area .8 acres

X Basement with Plumbing ____ Basement without Plumbing ____ No Basement



Plot of System

Size of Tank Existing Gals.

Nitrification Field:

No. of Lines 3

Sq. Ft. 625 Linear Ft. 250

Depth of Stone in Lines 10"

Water Supply: Individual (X) Public ( )

7-20-76

Installed by Sam Oswalt

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

Signed: ____

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: existing system working OK at date of inspection OK to build 1 car garage storeage building

CERTIFICATE OF COMPLETION BY ____ DATE ____

EXISTING SYSTEM CHECKED BY: Charles K. Barnett DATE 9-19-85

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

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 Theron Brown DATE 11-7-80 PERMIT NO. 336

PHONE: Business _____ Home _____

LOCATION 150W, TR 1303, TL 1301, TL 1st Road to left, Stay left at forks, at end on R S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 61 SECTION OR BLOCK NO. 14

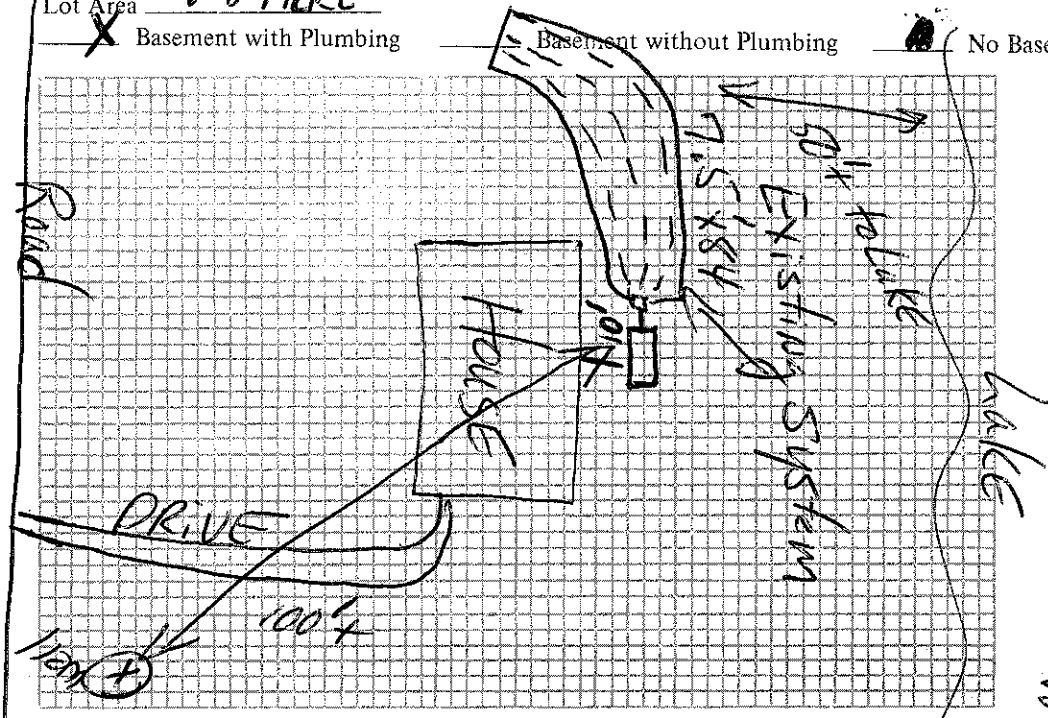
House (X) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Existing System	
Auto. Dishwasher	Yes (X)	No ( )	Percolation Rate		
Auto. Wash. Machine	Yes (X)	No ( )	Topography		
Site Suitable	Yes (X)	No ( )	Depth to Water Table		
			Rock or other impervious formations		

Lot Area .8 ACRE

(X) Basement with Plumbing ( ) Basement without Plumbing ( ) No Basement



Plot of System

Existing
Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 625 Linear Ft. 250
Depth of Stone in Lines 10"
Water Supply: Individual (X)
Public ( )

Installed by Sam Oswalt 7-29-76

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

Signed: _____

System Checked by J. C. Moore 7-20-76

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: Existing system working OK At date of inspection MH to be removed before final porch Approval to be given

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 11-7-80

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

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 Thorton Brown DATE 7-20-12 PERMIT NO. 12

PHONE: Business _____ Home 462-4853

LOCATION 1503 Tilson Rd 15th Rd To last

house left on Rock at end on right S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 41 SECTION OR BLOCK NO. 14

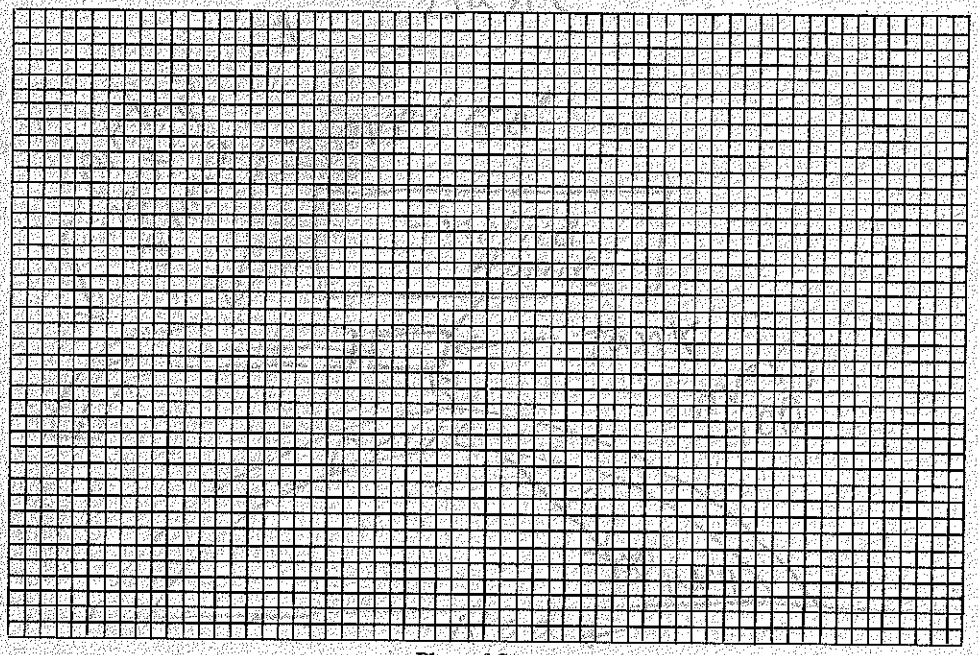
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 3 No. Bathrooms 1

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

Lot Area Corner

Character & Porosity of Soil Clay loam Porosity Fair
Percolation Rate 30" 1 Inch
Topography Gentle Slope
Depth to Water Table 24"
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 225 Linear Ft. 250
Depth of Stone in Lines 24"
Water Supply: Individual (✓)
Public ( )

Installed by Sam Mc

IMPROVEMENTS PERMIT BY John Houston

COMMENTS: _____

CERTIFICATE OF COMPLETION BY _____ DATE 7-20-12

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