4638916758

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 W. Wallace DATE 10-24-80 PERMIT NO. 329

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303 TR 1479 TR 1480 ~1 mile on left

S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 13 SECTION OR BLOCK NO. 11

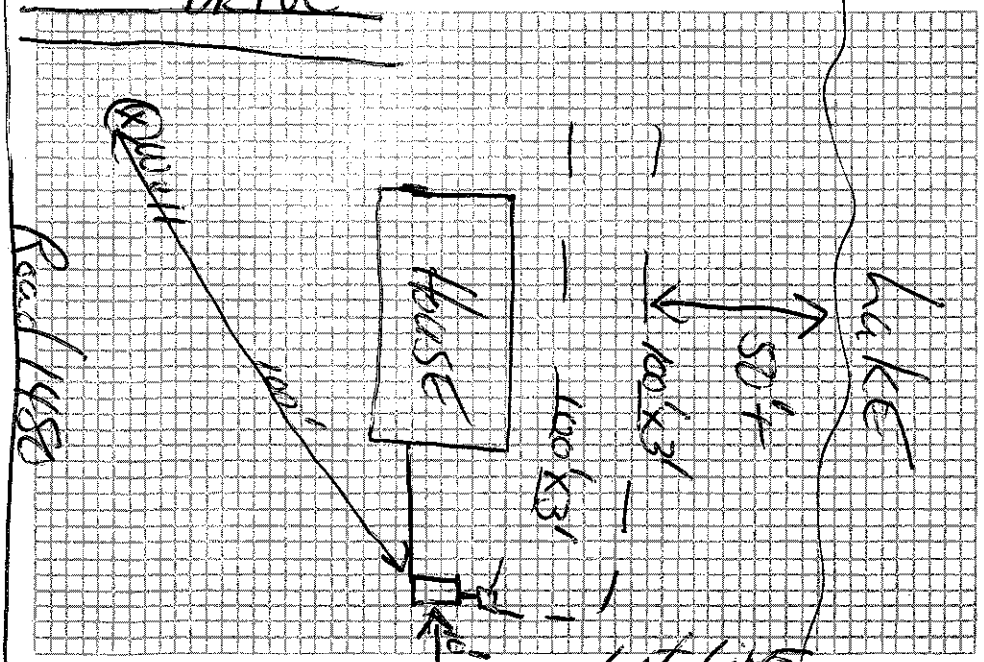
House (X) Mobile Home ( ) Business ( ) Other Addition to house

No. Bedrooms 3 No. Bathrooms 2

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

Lot Area ~3/4 ACRE

_____ Basement with Plumbing _____ Basement without Plumbing X No Basement



Size of Tank 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 16"

Water Supply: Individual (X)
Public ( )

Installed by Donald Tackett 9-22-78

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

Signed: _____

IMPROVEMENTS PERMIT BY John Houston

System inspection by John Houston 9-22-78

COMMENTS: Existing System working ok at date of inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 10-24-80

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