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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 Michael Fenton DATE 2-7-86 PERMIT NO. 60

PHONE: Business _____ Home _____

LOCATION 150 W SR 1303 SR Sagemore (1489) .3 mile on SR

SUBDIVISION NAME Lake Norman (X) Well ( ) Existing S. R. No. _____

LOT NO. 18 SECTION OR BLOCK NO. 14

Road

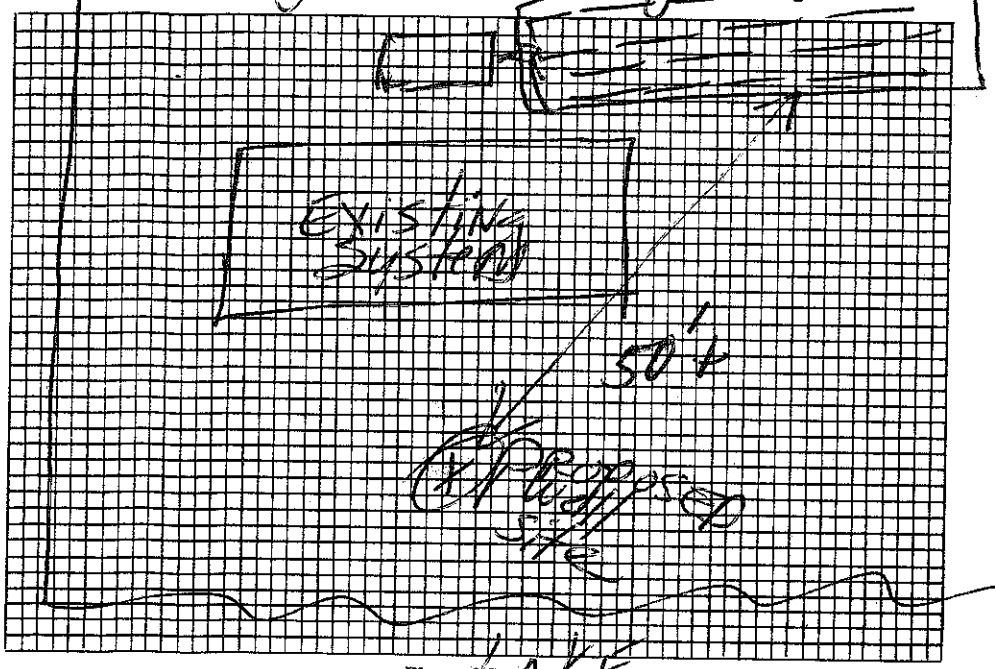
House ( ) Mobile Home (X) Business ( ) Other 504

No. Bedrooms 3 No. Bathrooms 2

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	Shop building 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	
Lot Area Existing			Rock or other impervious formations	

_____ Basement with Plumbing _____ Basement without Plumbing _____ No Basement

Existing system



Plot of System

Size of Tank Existing Gals.

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

Water Supply: Individual (X)
Public ( )

Installed by _____

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: Existing System Working OK At Time of inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Fred Clemmer DATE 2-7-86

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 Perry mishaw DATE 10-31-17 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION N.C. 150 W Turn right on 1303 TR after bridge ½ mi on right S. R. No. _____

SUBDIVISION NAME Lake Norman LOT NO. 18 SECTION OR BLOCK NO. 14

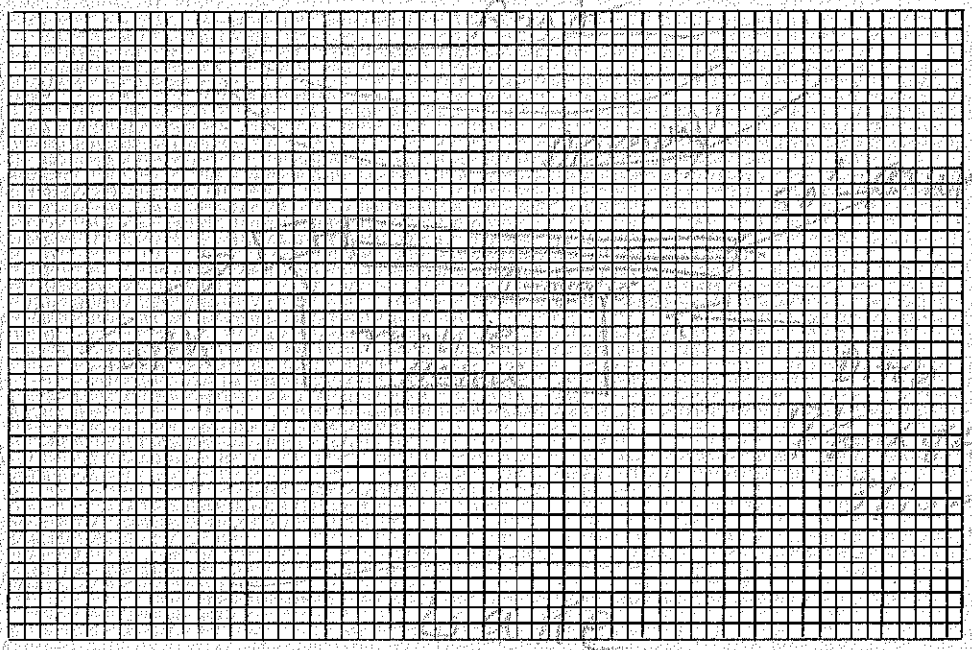
House ( ) Mobile Home (✓) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 1

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

Lot Area ½ acre

Character & Porosity of Soil Sandy clay loam
Percolation Rate 30 min
Topography Gently Sloping
Depth to Water Table 5'-6' Low level
Rock or other impervious formations None



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 3
Sq. Ft. 675 Linear Ft. 450
Depth of Stone in Lines 18"
Water Supply: Individual (✓)
Public ( )

Installed by Bennie Myers

IMPROVEMENTS PERMIT BY J. C. Mercer

COMMENTS: _____

CERTIFICATE OF COMPLETION BY W. C. Mercer DATE 11-3-17

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