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 Eisele DATE Feb 26, '88 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303 (Perth Rd) TL 1300 (Fern Hill) TR 1449 (Riverbend) Bear Rt in curve ~150' TL on Rt. S. R. No. _____

SUBDIVISION NAME C L & T LAKE NORMAN LOT NO. 959 SECTION OR BLOCK NO. 15

Dell.

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

No. Bedrooms 3 No. Bathrooms 2

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

Character & Porosity of Soil clay
Percolation Rate 2.4
Topography 15-30% 4+
Depth to Water Table _____
Rock or other impervious formations none obs.

Lot Area ~3/4 Ac.+ LAKE

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement

1000 gal pump tank

Size of Tank 1000 Gals.

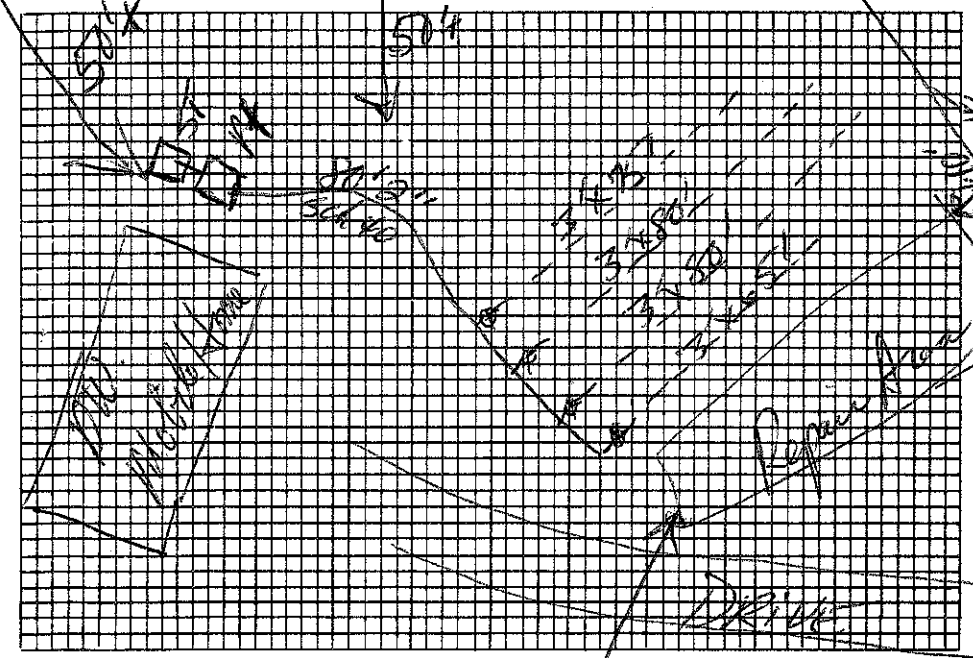
Nitrification Field:
No. of Lines 4
Sq. Ft. 900 Linear Ft. 300
Depth of Stone in Lines 12"

Water Supply: Individual (✓)
Public ( )

Installed by Levon Benton

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

Signed: _____



Plot of System

IMPROVEMENTS PERMIT BY DRH

COMMENTS: _____

CERTIFICATE OF COMPLETION BY D. R. Hinson, RS. DATE Feb 26, 88

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