T639365113

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 Olin E. Brooks DATE 4-23-85 PERMIT NO. 162

PHONE: Business _____ Home _____

LOCATION 150 W TR 1303 TL 1300 TR 1471 Tennessee Circle BL 1471 2nd Lot on Left S. R. No. _____

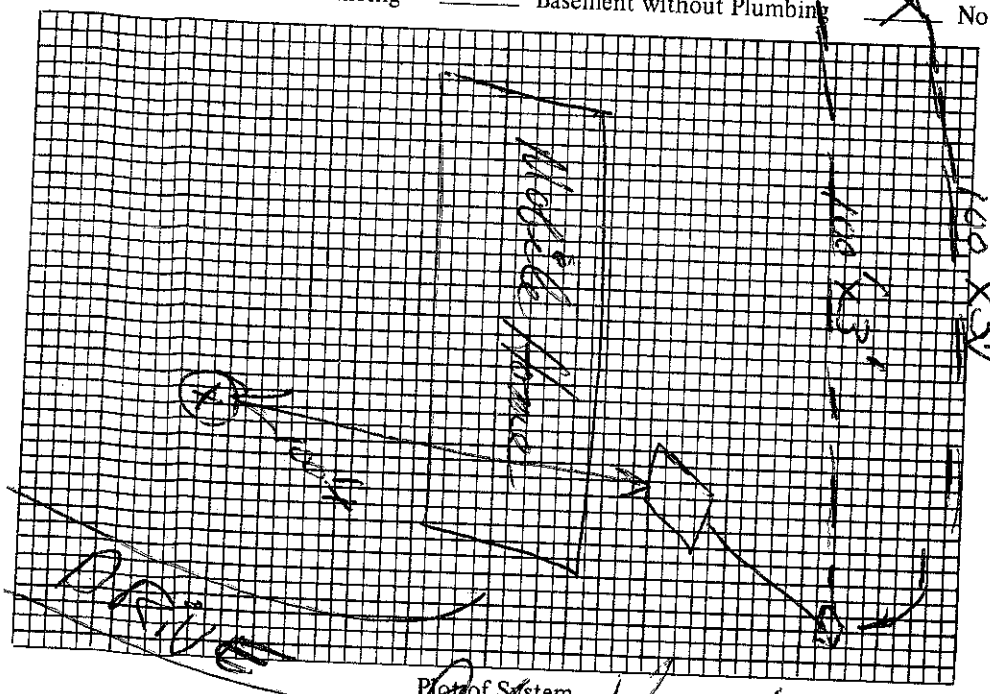
SUBDIVISION NAME Lake Norman LOT NO. 70 SECTION OR BLOCK NO. 16

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

No. Bedrooms 2 No. Bathrooms 1½

Garbage Disposal Unit	Yes ( )	No (X)	Character & Porosity of Soil	
Auto. Dishwasher	Yes ( )	No (X)	Percolation Rate	
Auto. Wash. Machine	Yes (X)	No ( )	Topography	EXISTING
Site Suitable	Yes (X)	No ( )	Depth to Water Table	System
Lot Area ~ 3/4 ACRE			Rock or other impervious formations	

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



Size of Tank EXISTING 1000 Gals.

Nitrification Field:
No. of Lines 2
Sq. Ft. 600 Linear Ft. 200
Depth of Stone in Lines 10"

Water Supply: Individual (X) Public ( )

Installed by Sam Ostwalt

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

Signed: _____

IMPROVEMENTS PERMIT BY John Haunstad

COMMENTS: Existing System working OK At date of inspection

CERTIFICATE OF COMPLETION BY _____ DATE _____

EXISTING SYSTEM CHECKED BY: Jack Clemmer DATE 4-23-85

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