4645-28-1128

IREDELL COUNTY HEALTH DEPARTMENT

12108

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Bob McLemore DATE 2/12/91 PERMIT NO. 26-21-A-1

PHONE: Business _____ Home _____

LOCATION 1206 (ALCOVE) TR 1108 (TEMPLETON RD.) past CAMINO REAL ON (R), TR into MORGANS LANDING, FIRST HOUSE ON (L) S. R. No. 1108

SUBDIVISION NAME MORGAN LANDING LOT NO. 1 SECTION OR BLOCK NO. _____

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

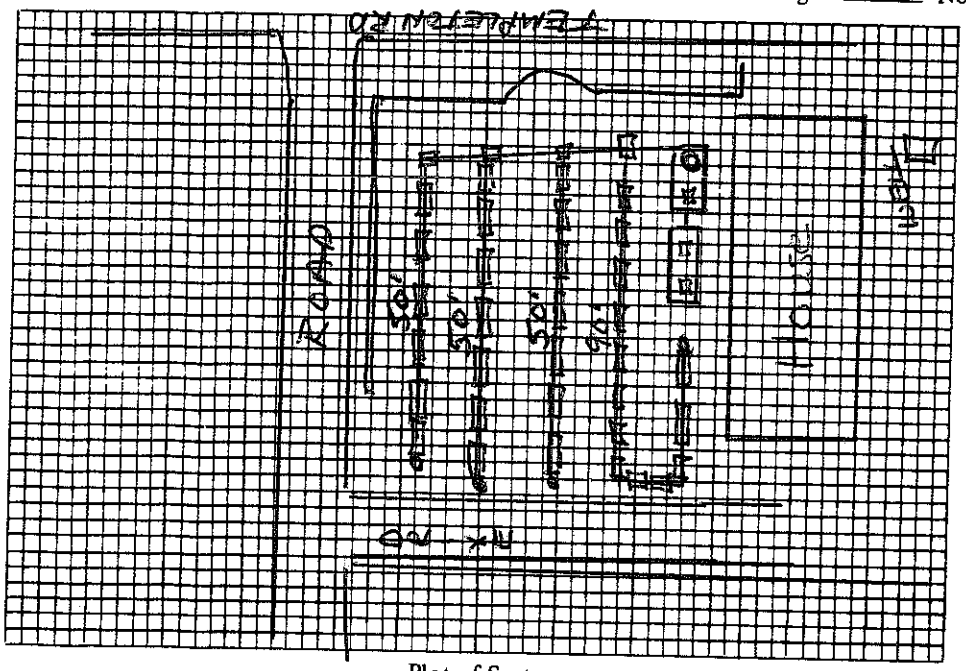
No. Bedrooms 3 No. Bathrooms 2½

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

Character & Porosity of Soil clay (Davidson-Lloyd)
Percolation Rate 25
Topography 2-4%
Depth to Water Table >4'
Rock or other impervious formations none observed

Lot Area 20,000 Ft²

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1250 - P/T Gals.
1500 - S/T

Nitrification Field:
No. of Lines 4
Sq. Ft. _____ Linear Ft. 240'
Depth of Stone in Lines _____
Water Supply: Individual ( ) 16" PANEL SYSTEM
Public ( )

Installed by Bobby Mayhew

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

Signed: _____

IMPROVEMENTS PERMIT BY _____

COMMENTS: _____

CERTIFICATE OF COMPLETION BY Wesley Sparks DATE 3/26/91 2/12/91

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