Y HEALTH DEPARTMENT — STATESVILLE 704-878-5505 — MOORESVILLE 704-664-5281

ERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

268090 DATE Sept 29 97 TAX MAP NO. 3774749738 Watershed: ☐ Yes ☐ No

K E S Manufacturing PHONE: Business _____ Home _____

1627 Mooresville NC 28106

ation: S on N Tr Stewart Rd Tr Fulbright Tr Carpenter Rd Tr Rivercliff on Right

BLOCK / SECTION 6 LOT 1 LOT AREA 3.98Ac SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

allons; STB 1794 Date 10-21-01 ☑ New System ☐ Repair System Type: I II III IV V VI ☑ House/Mod. Home No. Bedrooms 3 Water Supply: ☑ Individual

allons; PT _____ Date _____ System Description: gravity Conventional ☐ Mobile Home No. Bathrooms 3 ☐ Community

Model _____ Serial No. _____ Repair System Description: _____ ☐ Business No. Employees _____ ☐ Public

Square Feet 1200 Linear Feet 400 Maintenance Agreement Required: ☐ Yes ☑ No ☐ Other _____

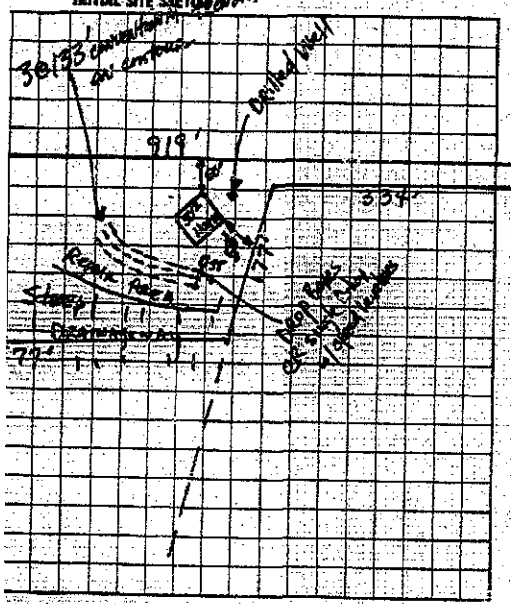
Width 36" Max Trench Bottom Depth 24" Gravel Depth 12" ☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

ft (50²) includes deck/patio;

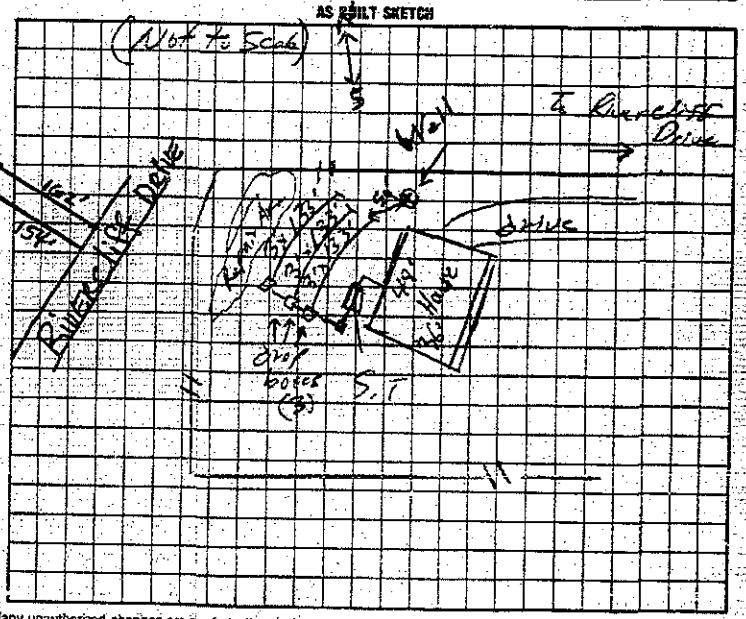
VOIDS PREVIOUS ISSUED 1-28-97

Comments:
- Label Filter Installed
- Septic Tank Marker Installed

INITIAL SITE SKETCH



AS BUILT SKETCH



uspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system.
nonths from date of issuance.

Installed by: Craig Thompson

Certificate of Completion by: William O Johnson date 12/4/01

Operation Permit by: _____ date _____

date 5-29-97

date 9/24-01

HITE — INSPECTION COPY (FINAL): GREEN — OWNER COPY (FINAL): YELLOW — INSPECTION COPY (INITIAL): PINI — OWNER COPY (INITIAL): GOLD

The proposed Screened Addition addition does not appear to impact the existing septic system.

**NOTE: Existing Slab from Garage Addition.

_____, R.S.

Date: 20 Mch 09

ICHD-Environmental Health Division

JAN. 28, 1989 0:38