IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 26166 DATE 10-13-97 TAX MAP NO. 3784 35 1128

OWNER OR CONTRACTOR AGUSTIN ROQUE Watershed: ☐ Yes ☒ No

ADDRESS 7178 SHERRILLS FORD, NC 28673 PHONE: Business 459-5024 Home 478-2363

LOCATION I-40 W, TR SHARON SCHOOL RD, TL GUN CLUB ROAD, 0.6 MILE ON LEFT

SUBDIVISION ______ BLOCK / SECTION ______ LOT ______ LOT AREA 12.589 ACRES SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 0.30 GAL/FT2

Septic Tank: 1000 Gallons; STB 786 Date 8-28-97
Pump Tank: ______ Gallons; PT ______ Date ______
Pump Make: ______ Model ______ Serial No. ______
Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270
No Lines THREE Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: CONV. GRAVITY
Repair System Description: CONV. GRAVITY
Maintenance Agreement Required: ☐ Yes ☒ No

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 2 No. Bathrooms 2 No. Employees ______

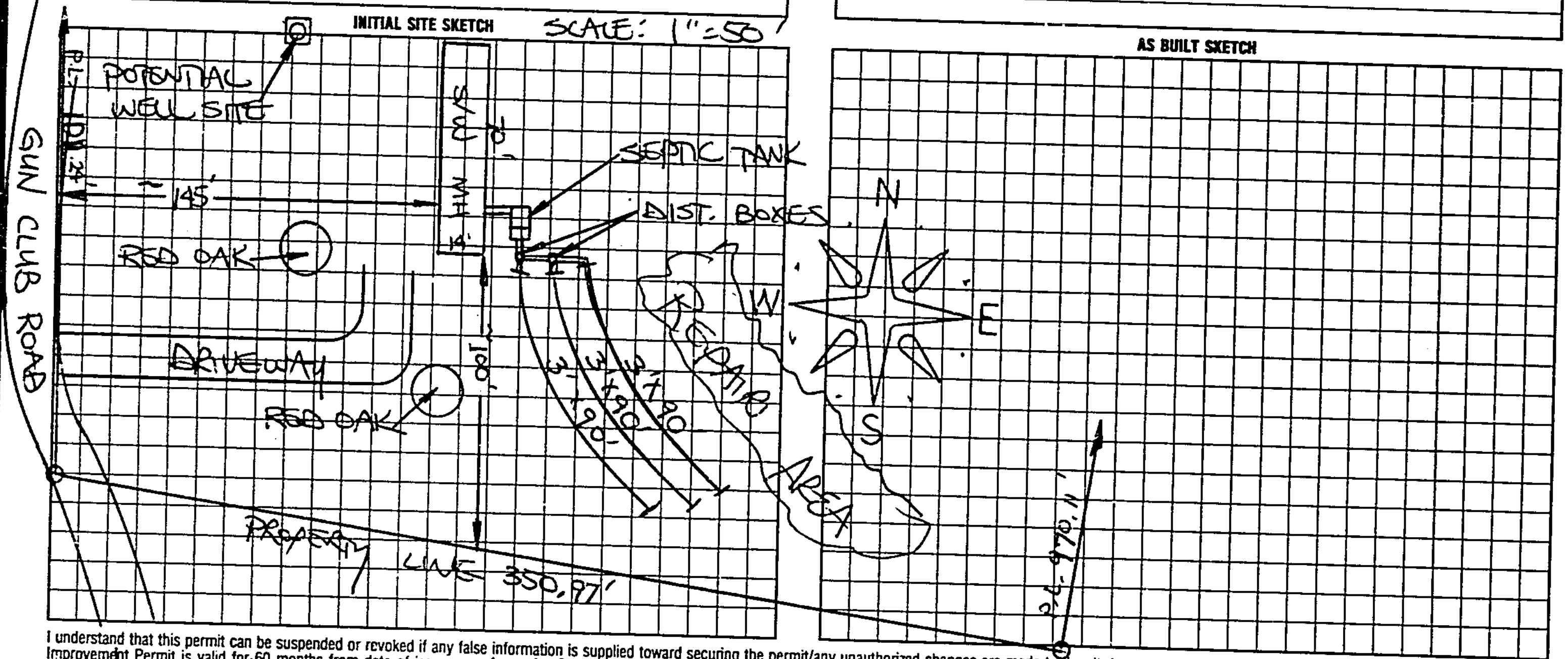
Water Supply: ☒ Individual ☐ Community ☐ Public WELL

Comments: KEEP SYSTEM MINIMUM 100' FROM WELL

Comments:

INITIAL SITE SKETCH SCALE: 1" = 50'

AS BUILT SKETCH



I understand that this permit can be suspended 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. Improvement Permit is valid for 60 months from date of issuance. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: [signature]

Improvement Permit by: STEVE HEDRICK date 10-13-97
AUTH. TO CONST.
~~Existing System Inspection~~ by: STEVE HEDRICK date 10-13-97

Installed by: Charlie Brice
~~Certificate of Completion~~ by: ______ date ______
Operation Permit by: J. C. Moore date 10-24-97

HEALTH DEPT COPY WHITE INSPECTION COPY (FINAL) GREEN OWNER COPY (FINAL) YELLOW INSPECTION COPY (INITIAL) PINK OWNER COPY (INITIAL) GOLD

921200