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. 20976 DATE 5-17-95 TAX MAP NO. Pt. of 8P-A-76 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Chris & Paula Dellinger PHONE: Business _____ Home 878-9431

ADDRESS 935 Sharon School Rd. Statesville, N.C. 28677

LOCATION I40 W TR Sharon School Rd. T L last Drive on L before Island Ford Rd. across from Sharon Supermarket

SUBDIVISION NA BLOCK / SECTION — LOT — LOT AREA 2.5 acres SITE CLASS. P.S. DESIGN FLOW 360 L.T.A.R. .33 sqft/lft²

Septic Tank: Existing Gallons; STB — Date —
Pump Tank: — Gallons; PT — Date —
Pump Make: — Model — Serial No. —
Nitrification Field: No Fields 1 Square Feet 360 Linear Feet 120'
No Lines 1 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

☐ New System ☑ Repair System Type: I II III, IV, V, VI
System Description: conventional, gravity fed.
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☑ No

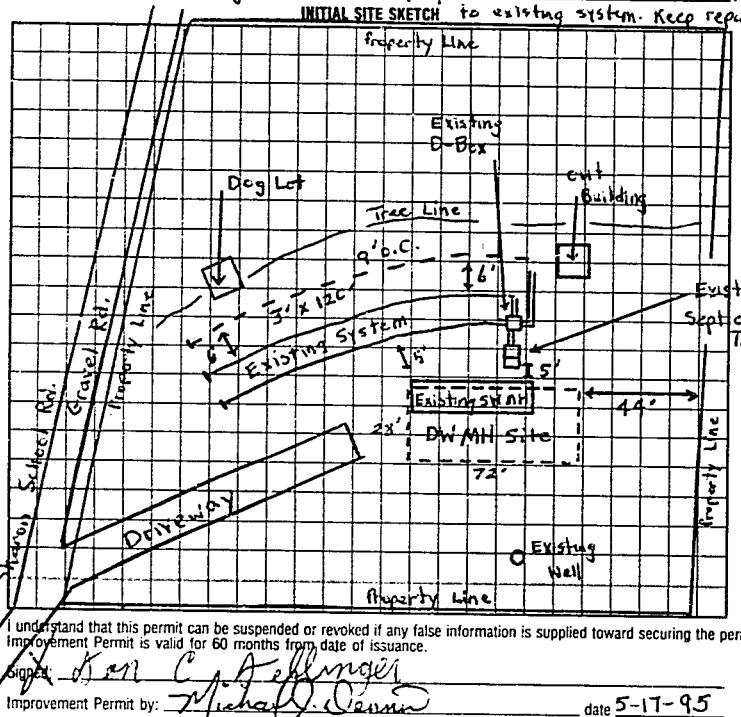
☐ House/Mod. Home ☑ Mobile Home ☐ Business ☑ Other plus playroom
No. Bedrooms 3 No. Bathrooms 3 No. Employees _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: Upgrading 2 Bedroom System to a 3 Bedroom System. Moving off 2 Bedroom SW MH, replacing with 3 Bedroom DW MH. Originally a 4 Bedroom DW MH, owners and manufactures removing a closet and making 1 bedroom a playroom. Install 1 (120') drain line to existing system. Keep repair line 9' o.c. from existing lines. Install line no deeper than 30" to trench bottom. Keep trench & line on contour. Keep Home min. 5' from any part of septic system. System shows no visible signs of malfunction at time of inspection.

Comments: Home located at time of inspection

INITIAL SITE SKETCH



AS BUILT SKETCH

SAME AS INITIAL 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.

Signed: Ken C. Dellinger

Improvement Permit by: Michael Dennis date 5-17-95

Existing System Inspection by: _____ date _____

Installed by: A-1 Backhoe

Certificate of Completion by: Michael Dennis date 7-5-95

Operation Permit by: _____ date _____

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

0 0 0 1 2 2