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. 069934 DATE 11-21-97 TAX MAP NO. 3722 85 3522 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR JIMMY SHAVER PHONE: Business ~~Home~~ 873-8191

ADDRESS P.O. BOX 6424, STATESVILLE NC 28687

LOCATION US 70 W, TL EUFOLA ROAD, TL NEW STREET BEFORE BRIDGE, 1ST DRIVE ON RIGHT

SUBDIVISION ____ BLOCK / SECTION ____ LOT 4 LOT AREA 1.44 ACRE SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 786 Date 1-24-98

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: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other 2BR ONLY

No. Bedrooms 2 No. Bathrooms 1 No. Employees ____

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

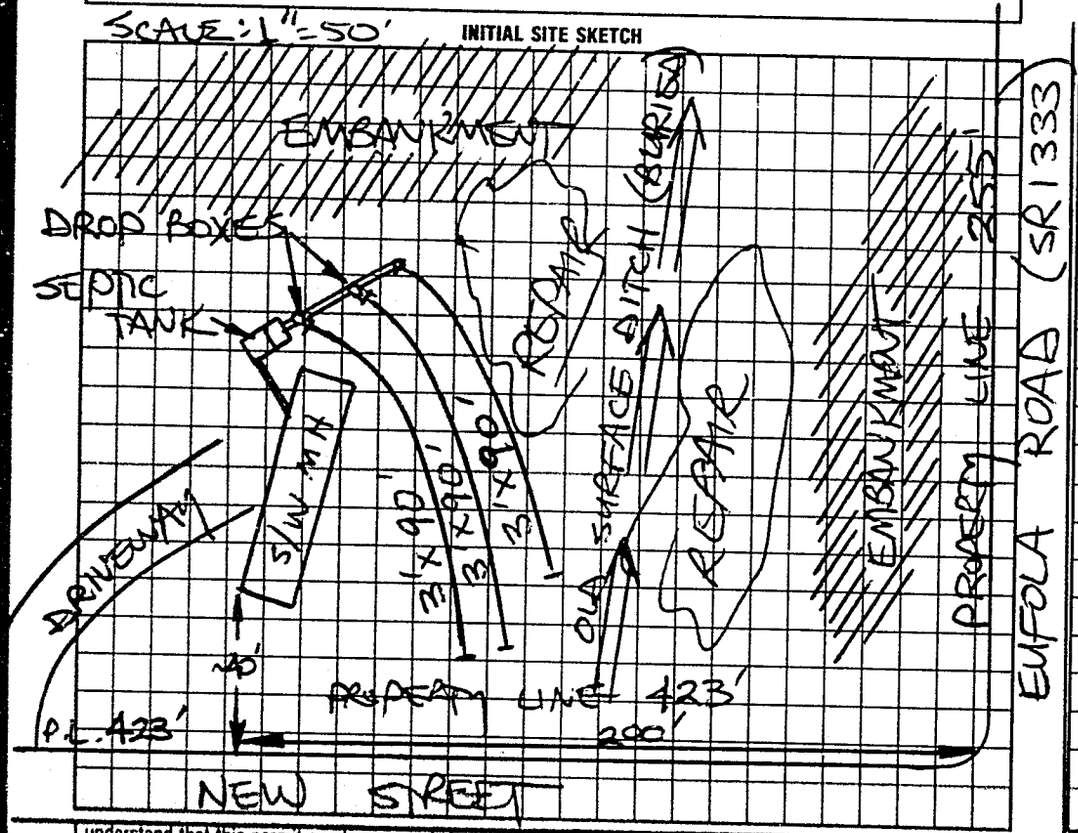
Water Supply: ☑ Individual ☐ Community ☐ Public WELL

Comments: KEEP SYSTEM MINIMUM 100' FROM WELL

Comments:

SCALE: 1" = 50'

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. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: X Jimmy Lee Shaver

Improvement Permit by: STEVE HEDRICK date 11-21-97

AUTH. TO CONST.

Existing System Inspection by: STEVE HEDRICK date 11-21-97

Installed by: Charlie Brice

~~Certificate of Completion~~ by: ____ date ____

Operation Permit by L. C. Moore date 10-6-98

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