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. N/A DATE 7/12/96 TAX MAP NO. 4615994934 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Rebecca McCubbin PHONE: Business _____ Home 664-4346

ADDRESS 355 ~~Chuckwood~~ Barber Loop Rd Mooresville NC. 28115

LOCATION Brawley Sch TR Chuckwood Rd, TR Barber Loop ~ 1 mile on (L)

SUBDIVISION CL+T BLOCK / SECTION 7 LOT 111 LOT AREA Existing SITE CLASS. _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: Existing ~~Gallons;~~ STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ____ Square Feet _____ Linear Feet _____

No Lines _____ Trench Width Existing ~~Max Trench~~ Bottom Depth _____ Gravel Depth _____

☐ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Existing System

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees ____

☐ Other _____

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

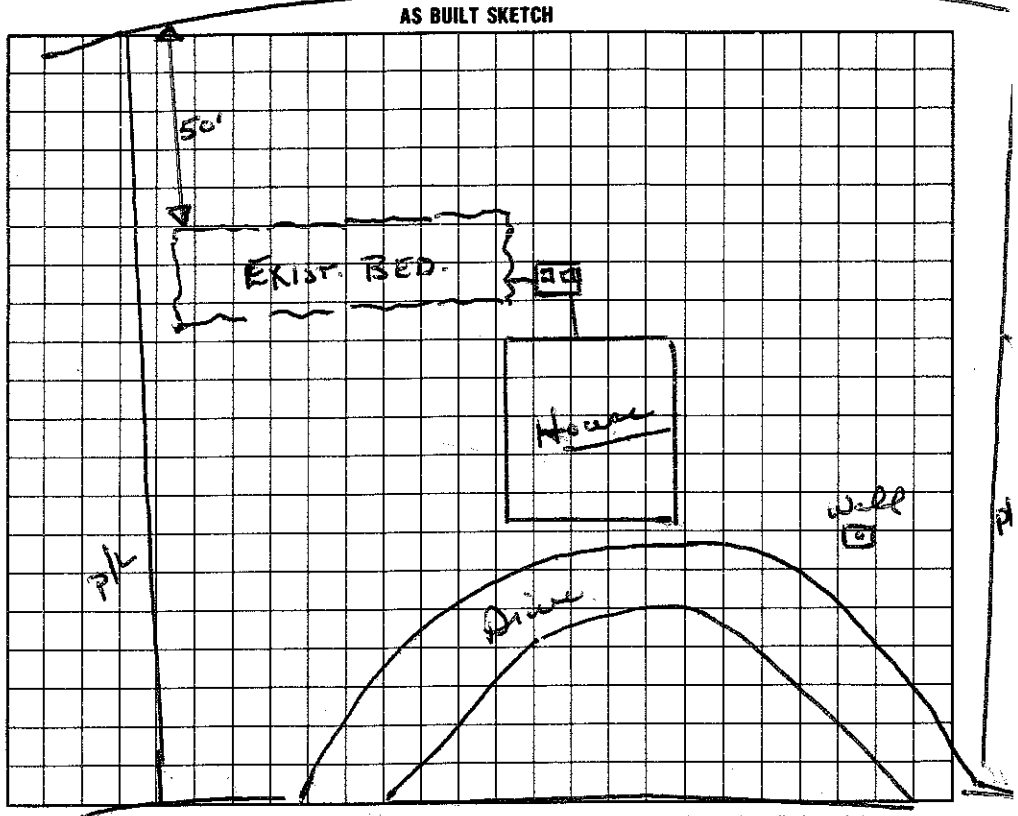
Water Supply:
☒ Individual
☐ Community
☐ Public

Comments:

Comments: The CONTOUR

INITIAL SITE SKETCH

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.

Barber Loop Rd.

Signed: _____

Improvement Permit by: _____ date _____

Existing System Inspection by: _____ date _____

Installed by: _____

~~Certificate of Completion~~ Existing System by: Wesley Sparks RS. date 7/12/96

Operation Permit by: _____ date _____

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