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. 14329 DATE Nov. 22, '96 TAX MAP NO. part of 2LA11 4616 93 9899 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR KZ Homes [CRI [COPELAND] PHONE: Business _____ Home _____

ADDRESS _____

LOCATION Brayley Sch Rd TR McKendree to end on Right SITE CLASS. Apr, 1956 DESIGN FLOW 480 gpd L.T.A.R. .3

SUBDIVISION Knob Ct. BLOCK / SECTION C LOT 4 LOT AREA ~20,000 ft²

Septic Tank: 1000 Gallons; STB 794 Date 4/3/97

Pump Tank: 1000 Gallons; PT 27 Date 5/2/97

Pump Make: Dual Ls Model WE0311L Serial No. 2853302

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 270

No Lines 6 Trench Width 24" Max Trench Bottom Depth ~30" Gravel Depth NA

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

System Description: press. manifold panel block

Repair System Description: LPP PPBPS

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4/4 No. Bathrooms 1 No. Employees ____

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

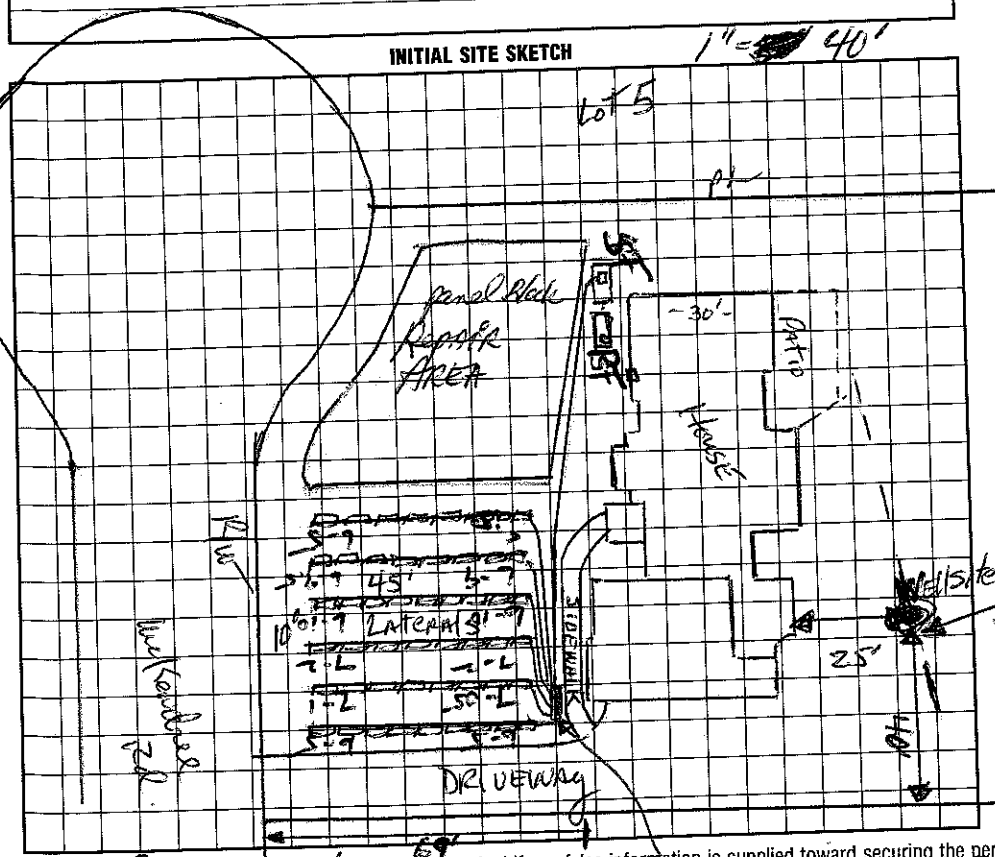
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

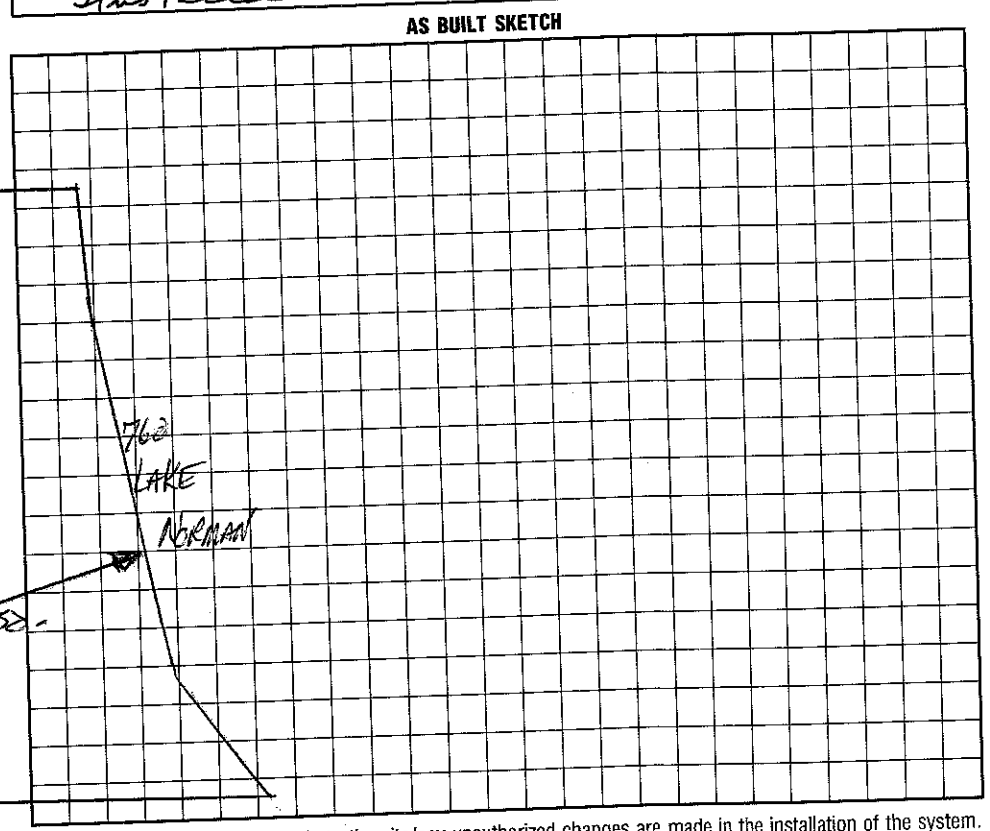
Comments:

Installed as drawn

INITIAL SITE SKETCH 1" = 40'



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.

Signed: _____

Improvement Permit by: Construction date 11-22-96

~~Existing System Inspection by:~~ _____ date 11-22-96

Installed by: FJ Ervin

Certificate of Completion by: Wesley Sparks RS. date 7/17/97

Operation Permit by: Wesley Sparks RS. date 7/17/97

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