IREDELL COUNTY HEALTH DEPARTMENT Const. Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 23375 DATE June 11, '96 TAX MAP NO. part of 2CA3 Watershed: ☑ Yes ☐ No

OWNER OR CONTRAC SAM SSY BURBANK PHONE: Business ~~Home~~ 4625-39-9812

ADDRESS P/L

LOCATION 5th lot on left past Bonner Lane

SUBDIVISION The HARBOUR ~~II~~ LOT 57 AREA ~22,000 ft² SITE CLASS. PS per 1996 DESIGN FLOW 480gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 794 Date 10/15/97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 4 Trench Width 24" Max Trench Bottom Depth 30" Gravel Depth NA

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

System Description: gravity panel block

Repair System Description: LP panel block

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees ____

☐ Other _____

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

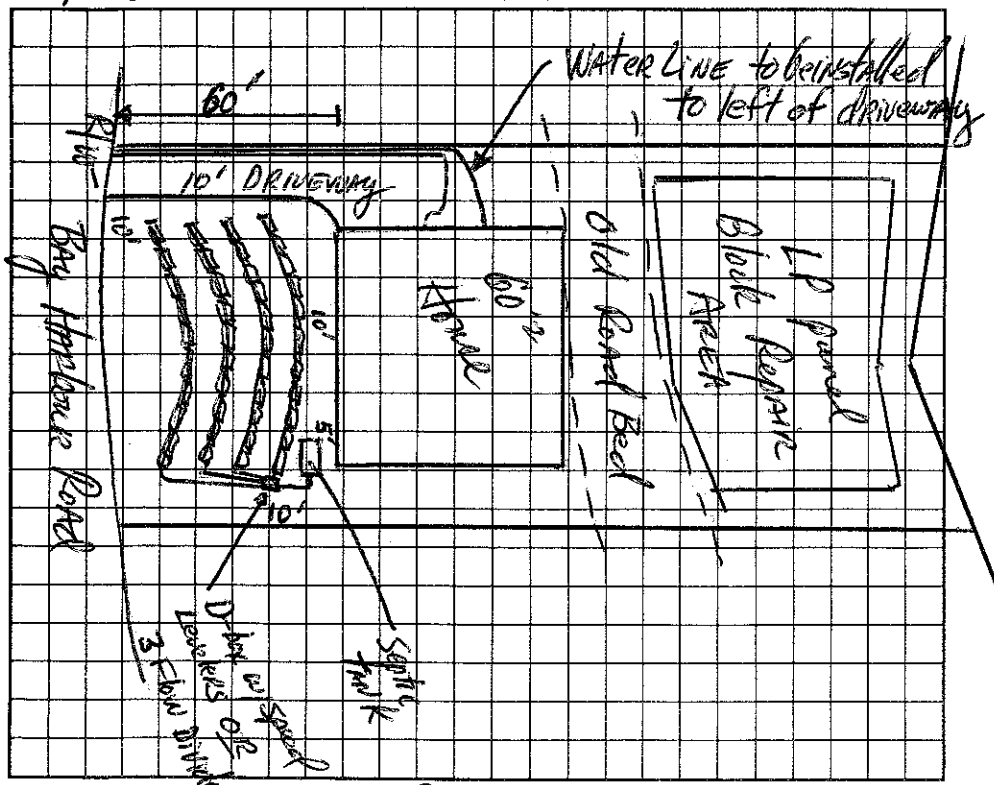
Water Supply:
☐ Individual
☐ Community
☑ Public

Comments:

Comments:

1"=50'

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.

Signed: * Tracy Stamper CSS

Improvement Permit by: Tracy Stamper RS date 6-11-96

~~Existing System Inspection by:~~ Const. Auth. Wesley Sparks RS. date 10/22/97

Installed by: MacLeod Const.

Certificate of Completion by: Wesley Sparks RS. date 4/16/98

Operation Permit by: Wesley Sparks RS. date 4/16/98

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