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. 19423 DATE Oct 4 1994 TAX MAP NO. 2F6A99

OWNER OR CONTRACTOR David Keith Blackburn Watershed: ☒ Yes ☐ No

ADDRESS 135 Pine Bluff Dr. ; Mooresville PHONE: Business ~~Home~~ 4626-31-2876 cw

LOCATION 1100 TR 1177 TR Eureka TR 1st St at end on left

SUBDIVISION ~~Holiday Harbor~~ BLOCK / SECTION LOT 79 LOT AREA 120'x170' SITE CLASS. PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB BAC 854 Date 5-26-94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 2 Square Feet 1200 Linear Feet 400

No Lines 3+3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: 1 saddle

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

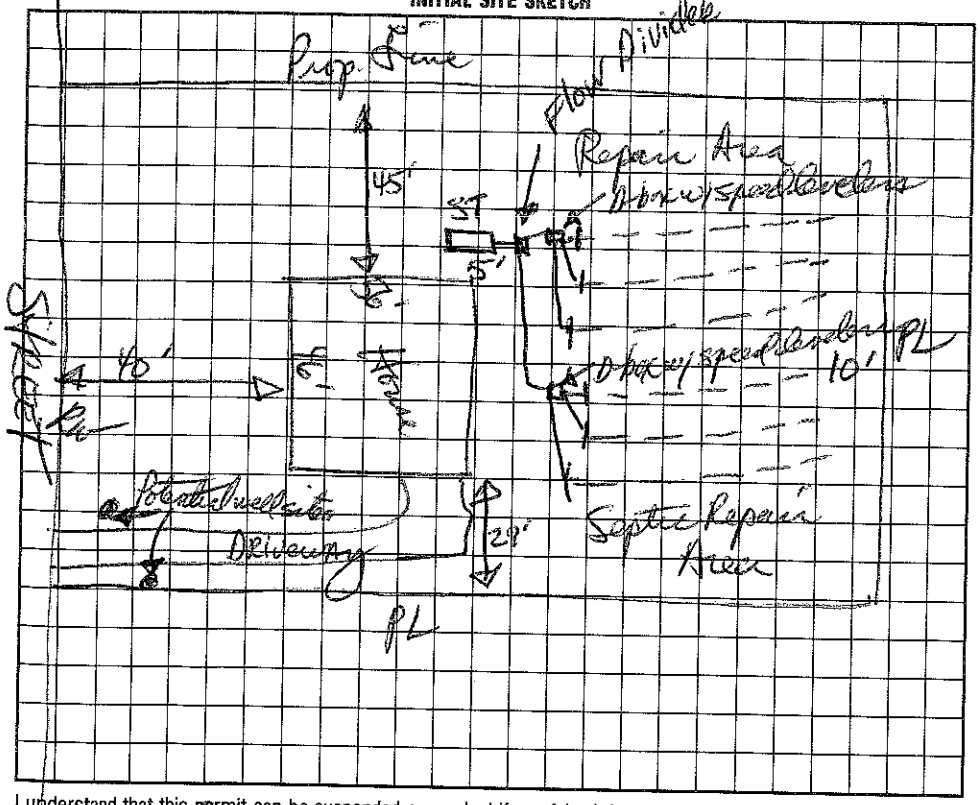
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

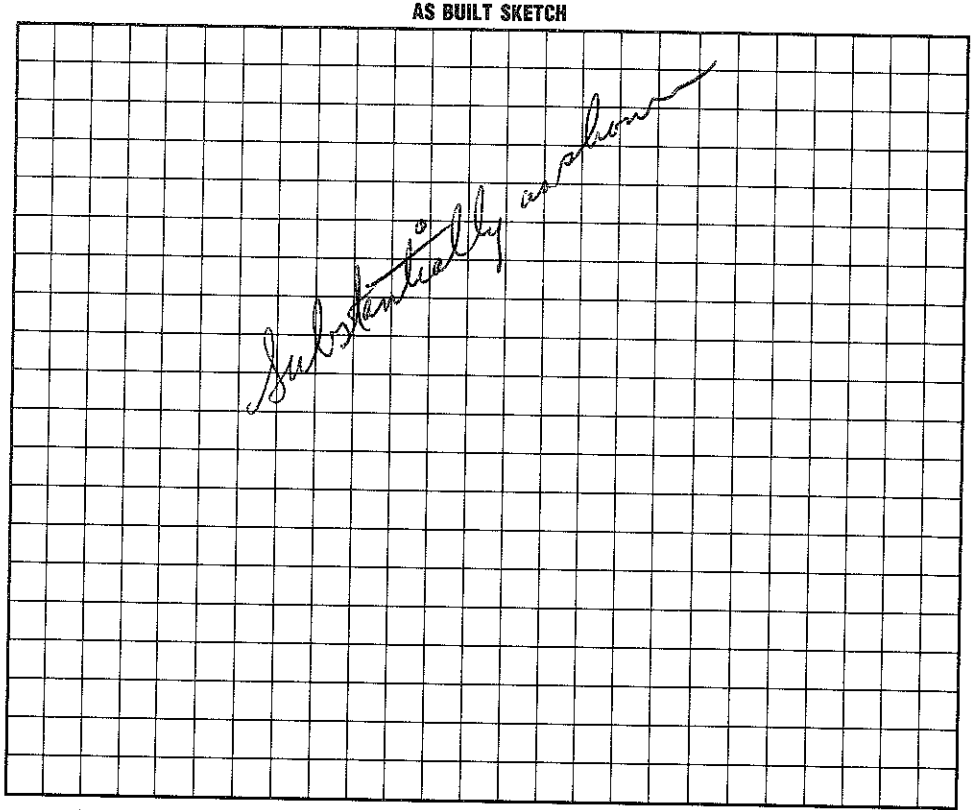
Comments: follow contour w/ laterals

Comments: Well not installed

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. Improvement Permit is valid for 60 months from date of issuance.

Signed: David Keith Blackburn

Improvement Permit by: [signature] / RS date 10/4/94

Existing System Inspection by: date

Installed by: Blackburn & Sons / Wilkes Co.

Certificate of Completion by: [signature] / RS date 11/4/94

Operation Permit by: date

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