IREDELL COUNTY HEALTH DEPARTMENT

Const. Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 23361 DATE June 5, '96 TAX MAP NO. part of 2CA3 4626403709 Watershed: ☑ Yes ☐ No

OWNER OR CON SAUSSY BURBANK PHONE: Business _____ Home _____

ADDRESS _____

LOCATION 4 Morrow's Ridge Cr. TR Wild Iris 3rd on Left

SUBDIVISION HARBOUR SECTION III LOT 21 LOT AREA 29,000 flat SITE CLASS. PSpa. 1956 DESIGN FLOW 480gpd L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 794 Date 5/8/95

Pump Tank: 1000 Gallons; PT 2-4 Date 3/15/98

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 5@80' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: pumped-pm-chambered

Repair System Description: None

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

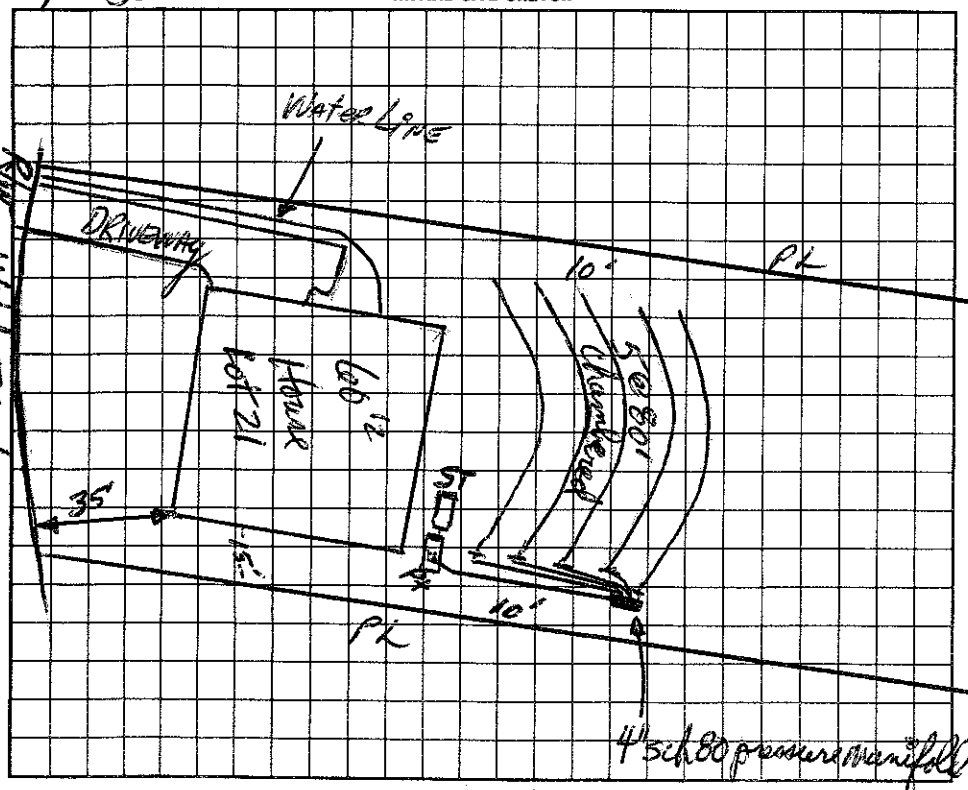
Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

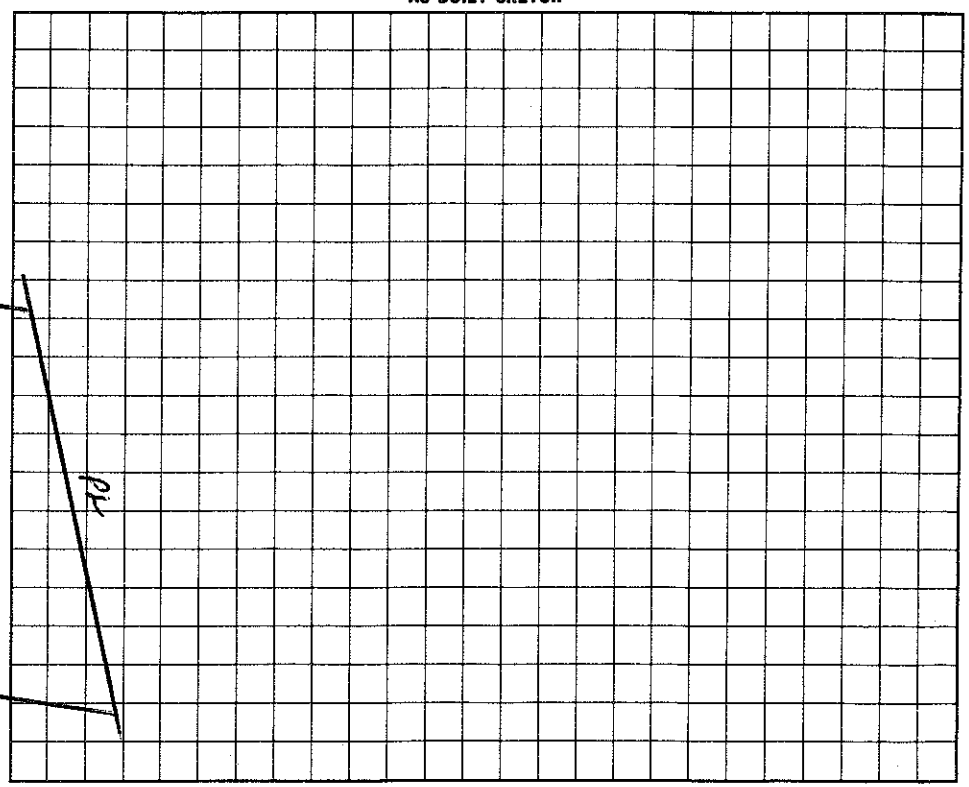
Comments: 7.5

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: _____

Improvement Permit by: _____ date 6-5-96

~~Existing System Inspection by:~~ Const Auth _____ date 10/22/97

Installed by: Marked

Certificate of Completion by: _____ date 5/15/98

Operation Permit by: _____ date 5/15/98

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