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. 17940 DATE April 13, 94 TAX MAP NO. 2F6A29 4626-42-8496 Watershed: ☑ Yes ☐ No LN

OWNER OR CONTRACTOR Marie Morton PHONE: Business _____ Home 896-7211

ADDRESS 21320 Shearer Rd. Davidson NC 28036

LOCATION 1100 TR 1177 (Auchwood) TR Seagrave TR Lakeland ~1/4 mile or less ON Right 15 to Lakeshore Rd.

SUBDIVISION Holiday Harbor BLOCK / SECTION _____ LOT 29 LOT AREA ~20,000 ft² SITE CLASS. I S or I RS DESIGN FLOW 240 gpd L.T.A.R. .425-.3

Septic Tank: 1000 Gallons; STB 714 Kellogg Date 11-2-94

Pump Tank: 1000 Gallons; PT 27 Kellogg Date 11-20-94

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 160

No Lines 3 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: LPP PPBPS

Repair System Description: Same

Maintenance Agreement Required: ☑ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

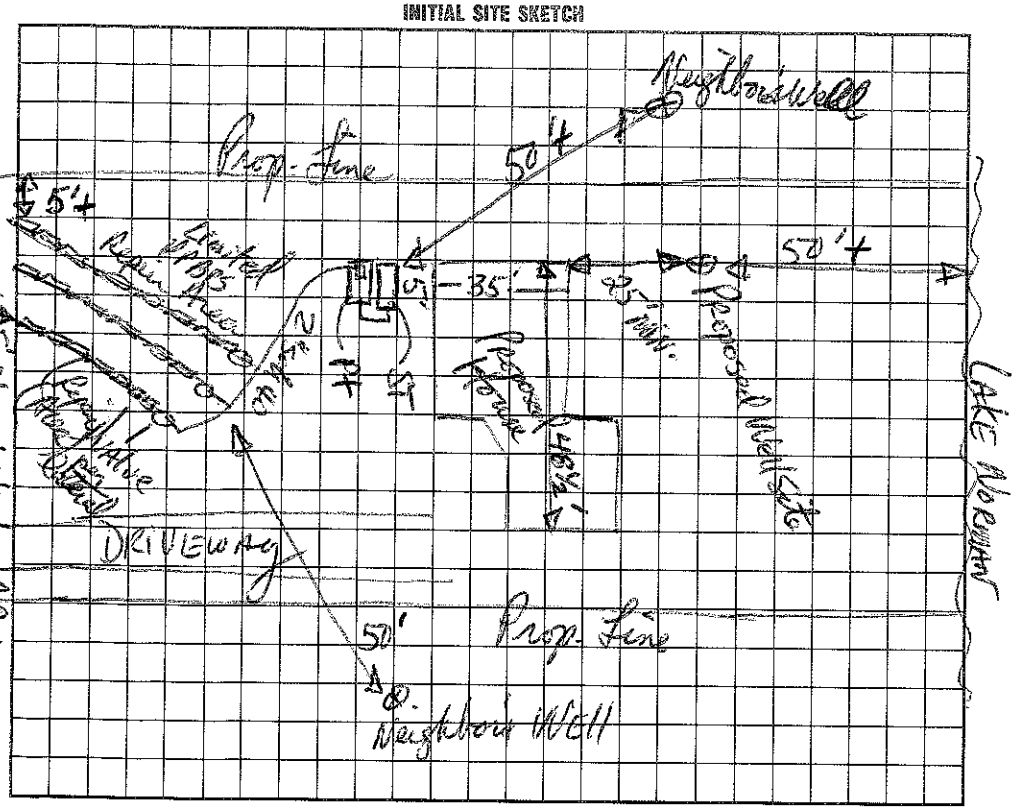
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: Lot recorded on Jan. 1993. 37 panels total; one 3/16" hole per panel; 2' pressure head. Pump specs 22 gal/min at approx. 20' head

Comments:

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: Martha Morton

Improvement Permit by: David R. Hoffman, RS date 4/13/94

Existing System Inspection by: _____ date _____

Installed by: Tim Ammons.

Certificate of Completion by: Wesley Sparks RS. date 2/8/95

Operation Permit by: Wesley Sparks RS. date 2/8/95

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