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. 22703 DATE April 29, '96 TAX MAP NO. part of 2LA11 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Easter Development Corp. PHONE: Business 664-7906 Home 4626-49-6871

ADDRESS 227 Hideaway Lane, Mooresville

LOCATION Bagley Sch Rd. TR McKendree TR High Circle TR Montclair TL Scottsdale on left at end

SUBDIVISION Hawks West BLOCK / SECTION ____ LOT 7 LOT AREA .54Ac SITE CLASS. Spec. 1951 DESIGN FLOW 360gpd L.T.A.R. = .3

Septic Tank: 1000 Gallons; STB 1612 Date 5/11/98

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

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

No Lines 4 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: geo chambered

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees ____

☐ Other ____

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

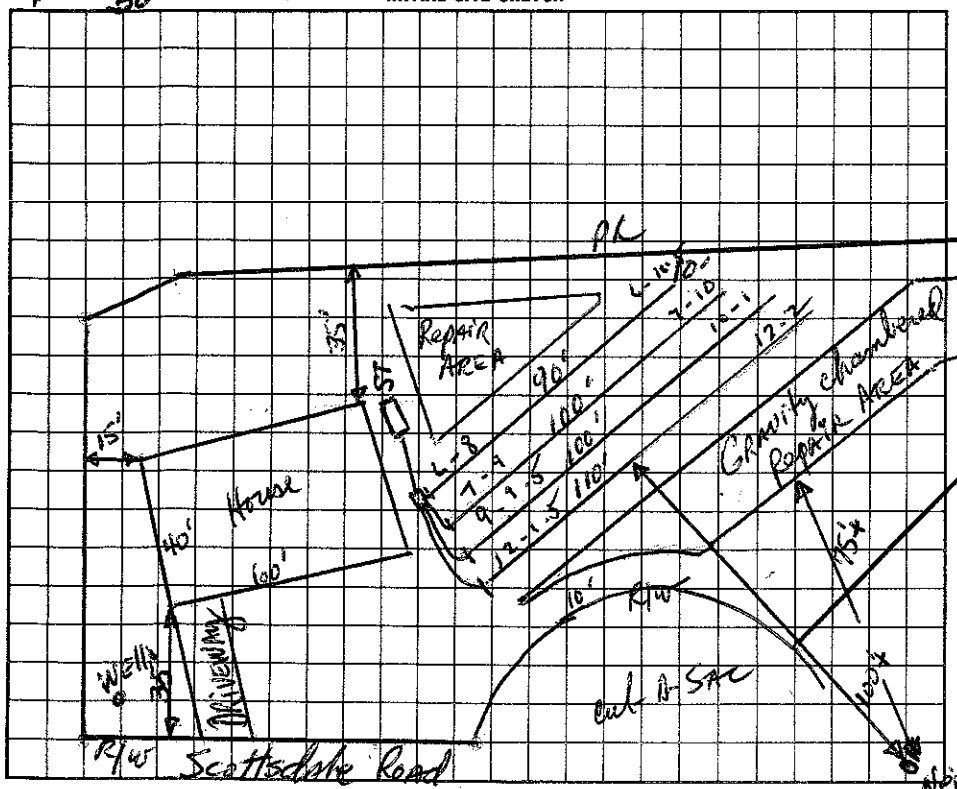
Water Supply: ☒ Individual ☐ Community ☐ Public

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: ____

Improvement Permit by: D R Hinson, RS date 4-29-96

Existing System Inspection by: D R Hinson, RS date 12-3-96

Installed by: Tommy Carthem

Certificate of Completion by: Wesley Sparks R.S. date 7/13/98

Operation Permit by: Wesley Sparks R.S. date 7/13/98

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