IREDELL COUNTY HEALTH DEPARTMENT

Authorization to Construct

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 23695 DATE 7/1/97 TAX MAP NO. 2N-8-A-28 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR GARY MULLER PHONE: Business 4628 M/ 1916 Home 322-9044

ADDRESS 127 31ST AVE - HICKORY

LOCATION 150 W- TR PINNACLE SHOPES DR. - TR SHELTER COVE LN- AT END

SUBDIVISION PINNACLE SHOPES BLOCK / SECTION _____ LOT 27 LOT AREA _____ SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 794 Date 3/25/97

Pump Tank: 1600 Gallons; PT 27 Date 5/10/97

Pump Make: GOULDS Model 5HP Serial No. _____

Nitrification Field: No Fields 1 Square Feet 480 Linear Feet 240

No Lines 4 @ 60 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: PUMP PANEL

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

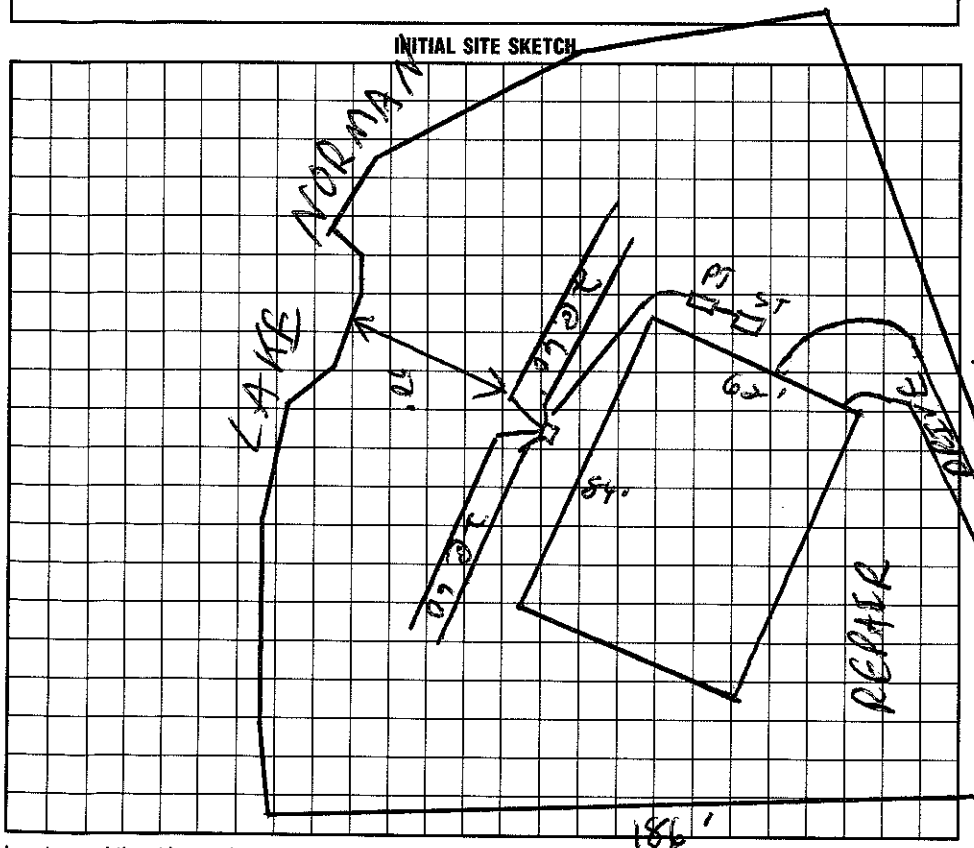
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

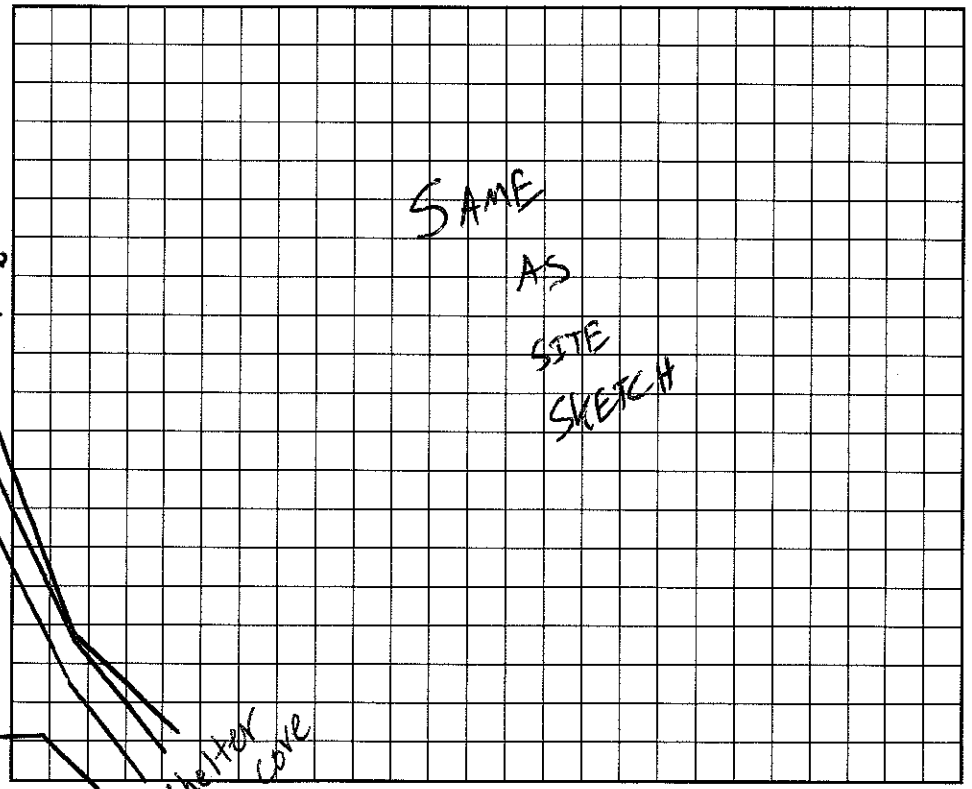
Comments:

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: _____

Improvement Permit by: Authorization to Construct date 7/1/97

~~Existing System Inspection by:~~ _____ date 7/1/97

Installed by: DENVER PLUMBING

Certificate of Completion by: _____ date _____

Operation Permit by: _____ date 8/7/97

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