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. 21944 DATE 9/4/97 TAX MAP NO. pt of 2NA20 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR JIM ~~YATES~~ YATES PHONE: Business 4628-80-3516 Home

ADDRESS PO BOX 1003 CHARLOTTE

LOCATION 150 W TR 2ST ENTRANCE - INDIGO LN. AT END OF CUL-DE-SAC

SUBDIVISION PINNACLE SHORES BLOCK / SECTION II LOT 15 LOT AREA SITE CLASS. PS DESIGN FLOW 450GPD L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 6/11/97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 540 Linear Feet 265

No Lines 4@67 Trench Width 24" Max Trench Bottom Depth 30" Gravel Depth N/A

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

System Description: GRAVITY PANEL

Repair System Description: PUMP PANEL

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 4

☐ Business No. Employees

☐ Other

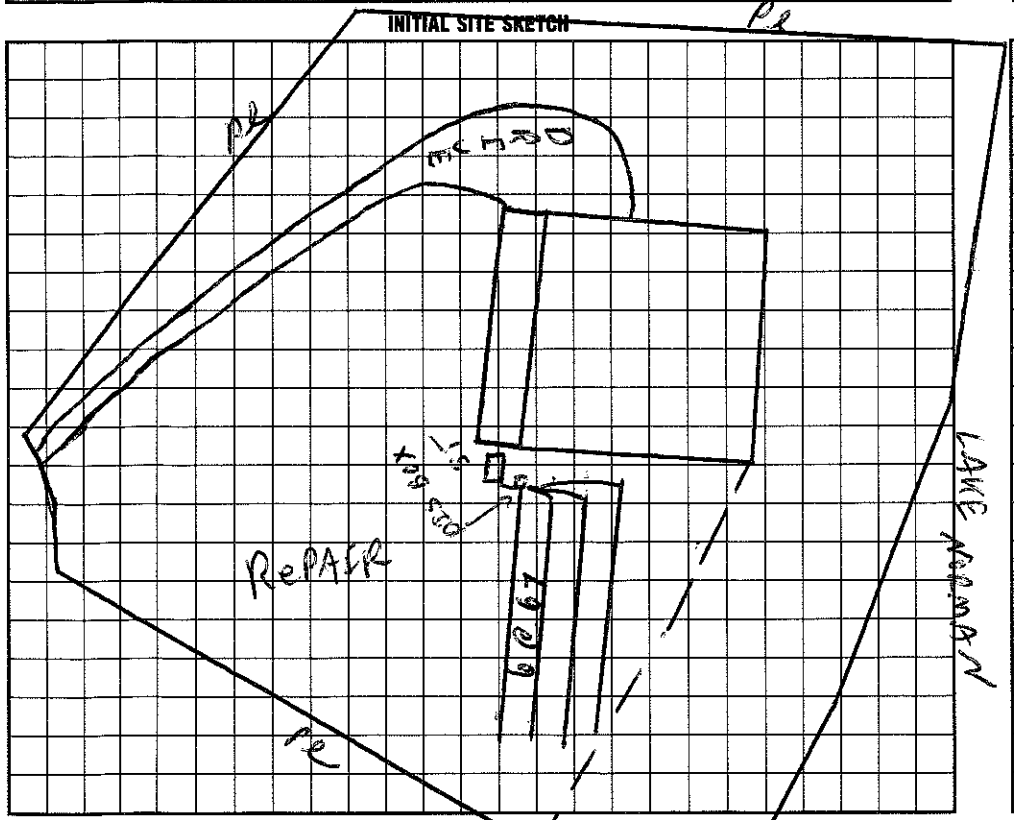
☐ Slab ☑ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☑ Community
☐ Public

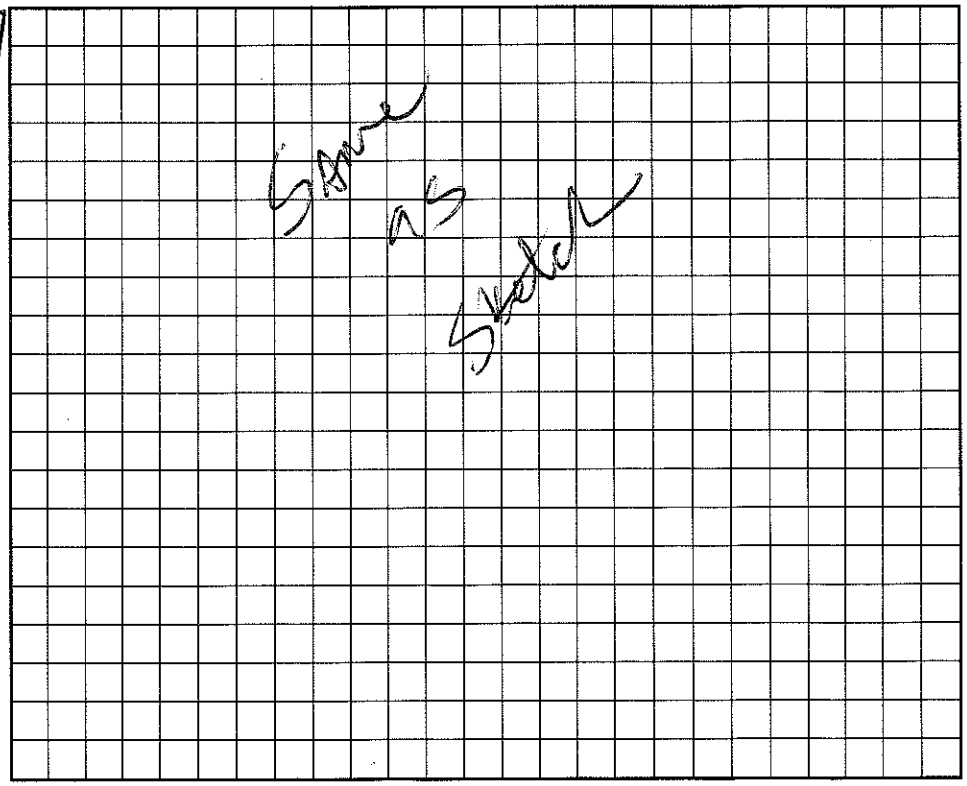
Comments:

Comments:

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: J-J

Improvement Permit by: C. Ferguson date 9/4/97

AUTHORIZATION TO CONSTRUCT Existing System Inspection by: C. Ferguson date 9/5/97

Installed by: FJ ERVEN

Certificate of Completion by: date

Operation Permit by: C. Ferguson date 9/10/97

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