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. 12488 DATE 3/15/96 TAX MAP NO. 2N5A262 4628 92 7206 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Ben R Honeycutt PHONE: Business _____ Home 895-0320

ADDRESS 117 Golden Pond Rd Mooresville, NC

LOCATION 150' W TR Winfield Dr Hampton Ct Golden Pond 3rd house on (L)

SUBDIVISION Cal T BLOCK / SECTION 11 LOT 262 LOT AREA ~.9AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. _____

Septic Tank: 1000 Gallons; STB 794 Date 12/8/95
Pump Tank: 1000 Gallons; PT 27 Date 11/20/95
Pump Make: Deadd Model WEC-511H Serial No. M9522191
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300
No Lines 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

☐ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Pressure to Chamber Plant
Repair System Description: 16" PPBS
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees _____
☐ Other _____

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

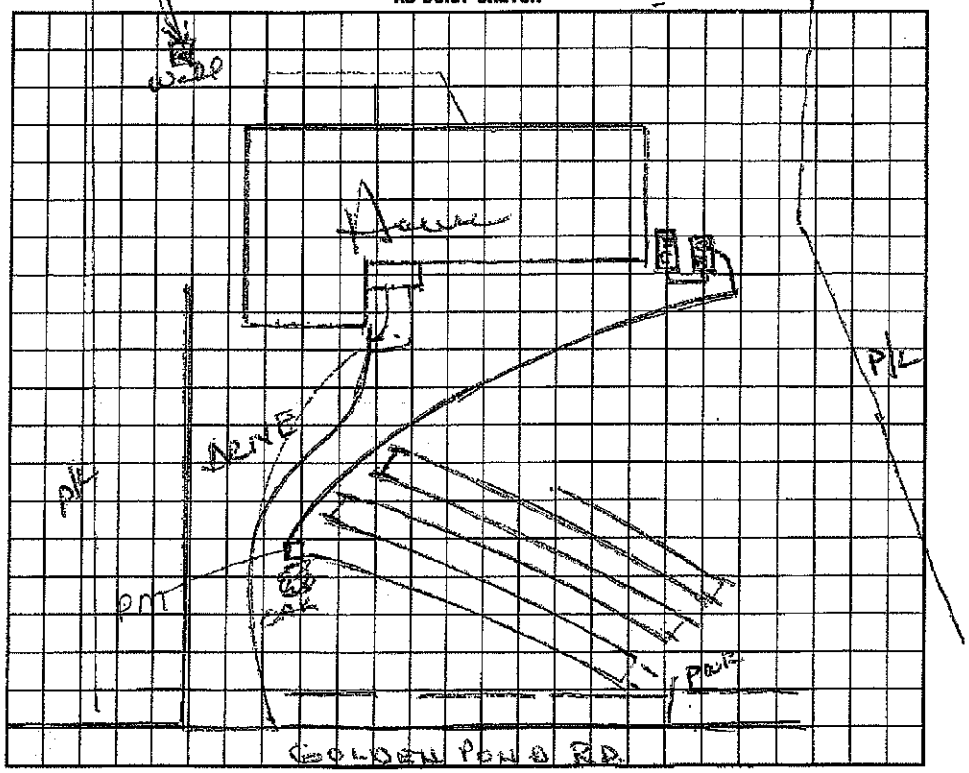
Water Supply:
☒ Individual
☐ Community
☐ Public

Comments: 6" Sand required over both lowers

Comments: 760 Contour 30'

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: _____ Installed by: F J Erwin

Improvement Permit by: _____ date _____ Certificate of Completion by: _____ date _____

Existing System Inspection by: _____ date _____ Operation Permit by: Wesley Sparks R.S. date 3/15/96

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