# ELL COUNTY HEALTH DEPARTMENT

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

## DEVELOPMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

DESCRIPTION NO. 18130 DATE 4-5-94 TAX MAP NO. 3C-6-A-126 Watershed ☐ Yes ☒ No

APPLICANT C F Houghton PHONE: Business Home 528-4225

MAILING ADDRESS 61 2 Box 235 Troutman, N.C. 28166

PROPERTY LOCATION Lake Point Rd. TR State Park Rd TR Morrison Farm TR Pennington Pt First home on L

SUBDIVISION N/A BLOCK NO. 17 LOT NO. 126 LOT AREA .69 acre SITE CLASS P.S. DESIGN FLOW 360 I.T.A.R. Existing

Existing System

☐ New System ☐ Repair System Type: ☐ I ☐ II ☐ III ☐ IV ☐ V

System Description: Existing System

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3.5

☐ Business No. Employees

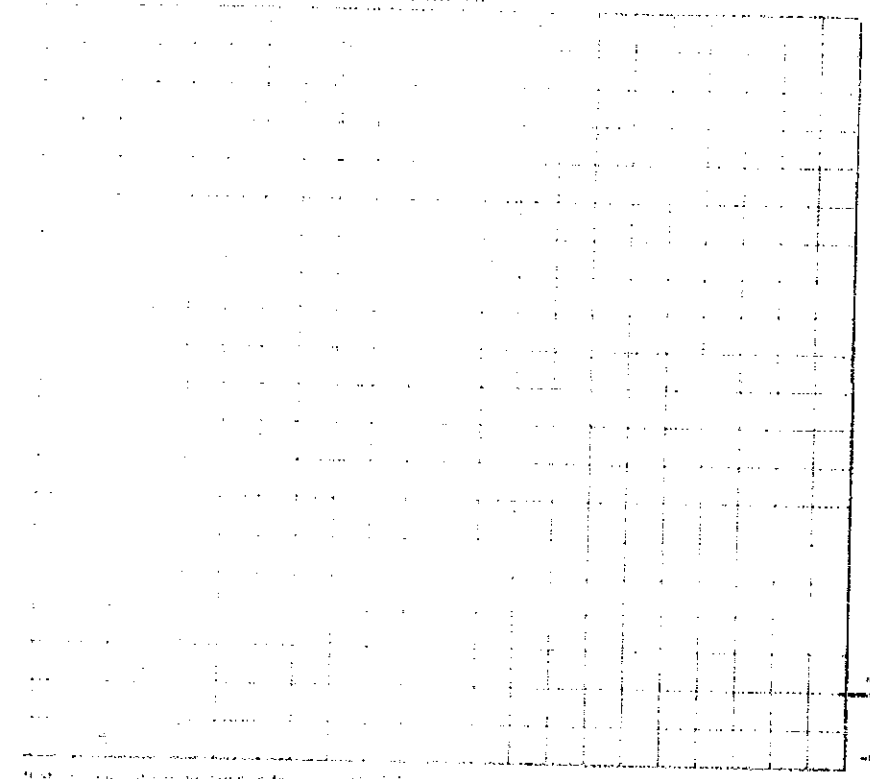
☐ Other

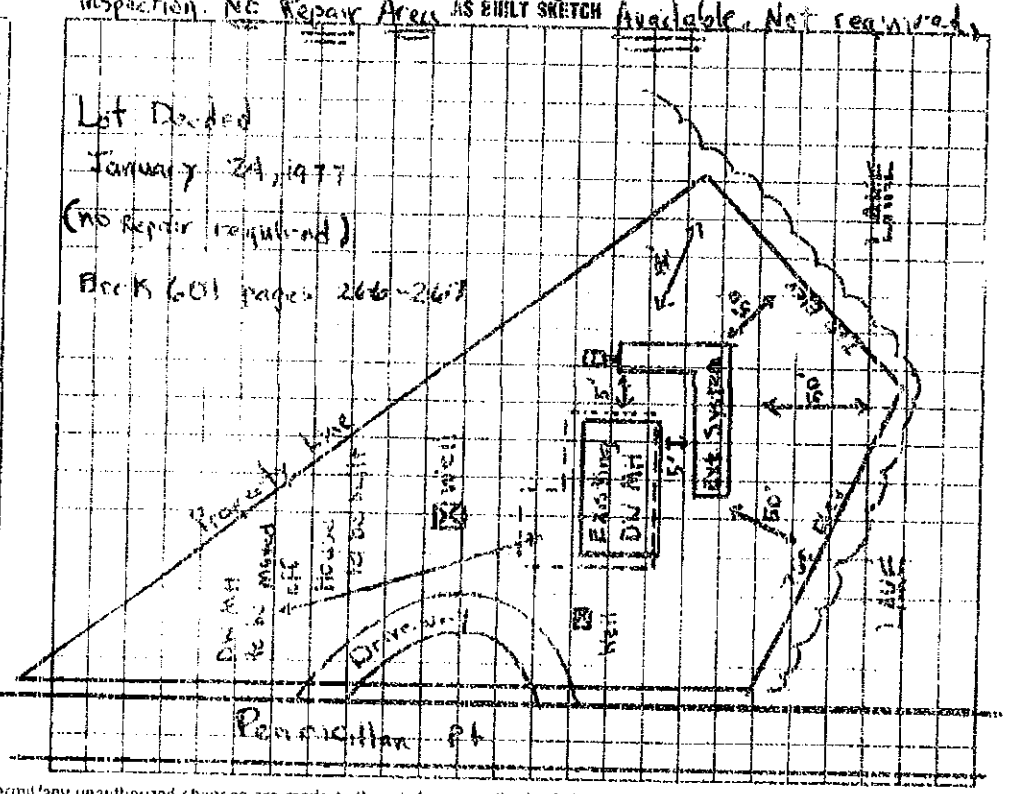
Water Supply:
☒ Individual
☐ Community
☐ Public

Bore Depth Gravel Depth ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments Removing 3 Bedroom DW MH, Replacing with 3 Bedroom House. House to be built in same location as DW MH. New House min 5' from any part of septic system. Septic system too deep to probe, system shows no visable signs of malfunction at time of inspection. No Repair Area AS BUILT SKETCH Available, Not required.

INITIAL SITE LAYOUT






That I give my consent to allow representatives of the Iredell County Health Department to enter upon the above described property for the purpose of making such inspections as are necessary in order that 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. This permit shall be void if construction is not started within six months from date of issue.

Applicant date 4-5-94

Installed by:

Certificate of Completion by date

Operation Permit by date

JAN. 28, 1989 20:52