IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTIO

PROPERTY DESCRIPTION NO. 18257 DATE Oct. 20, '94 TAX MAP NO. 2B7A29 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Mike Dunn PHONE: Business 754-1706 Home 4634799232

ADDRESS 215 NW Dr. Davidson

LOCATION 115 S. JR 1102 TL Royal Pt. TR Clearwater Dr. on Pt.

SUBDIVISION Royal Pt BLOCK / SECTION 1 LOT 29 LOT AREA 20,000 ft² + SITE CLASS. PS pm. 1952 DESIGN FLOW 360 gpd L.T.A.R. @ 3

Septic Tank: 1000 Gallons; STB 794 Date 9/27/94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No. Lines 4 & 3 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: LP RPBPS

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees

☐ Other

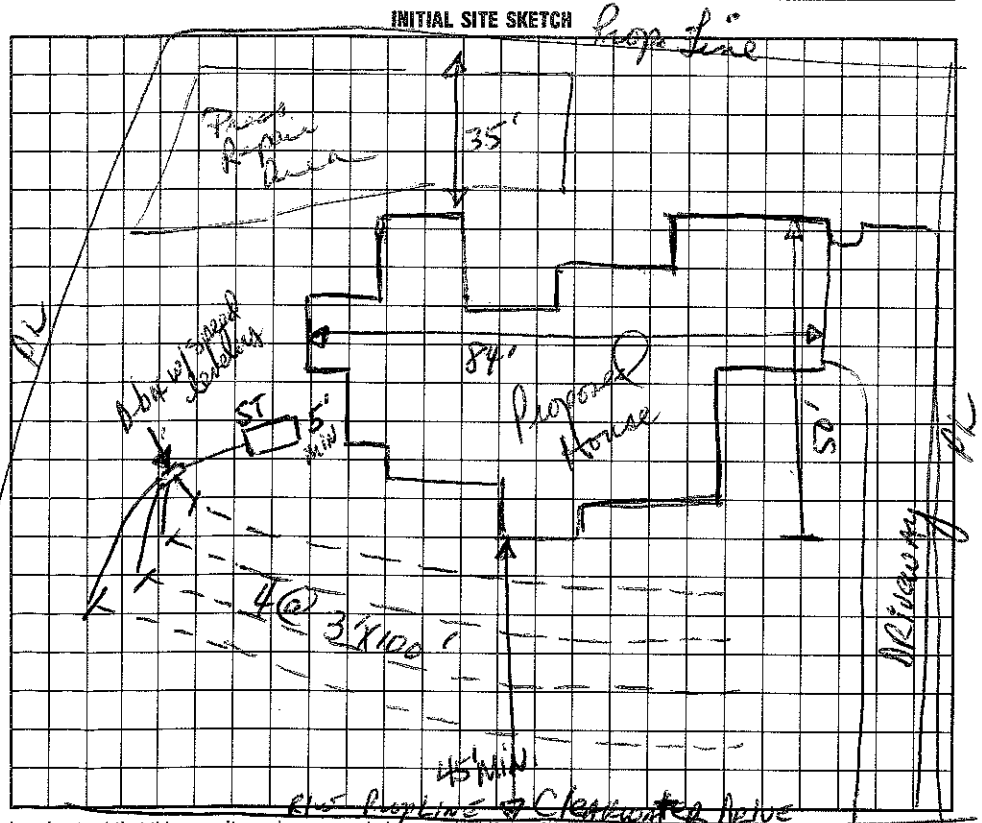
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

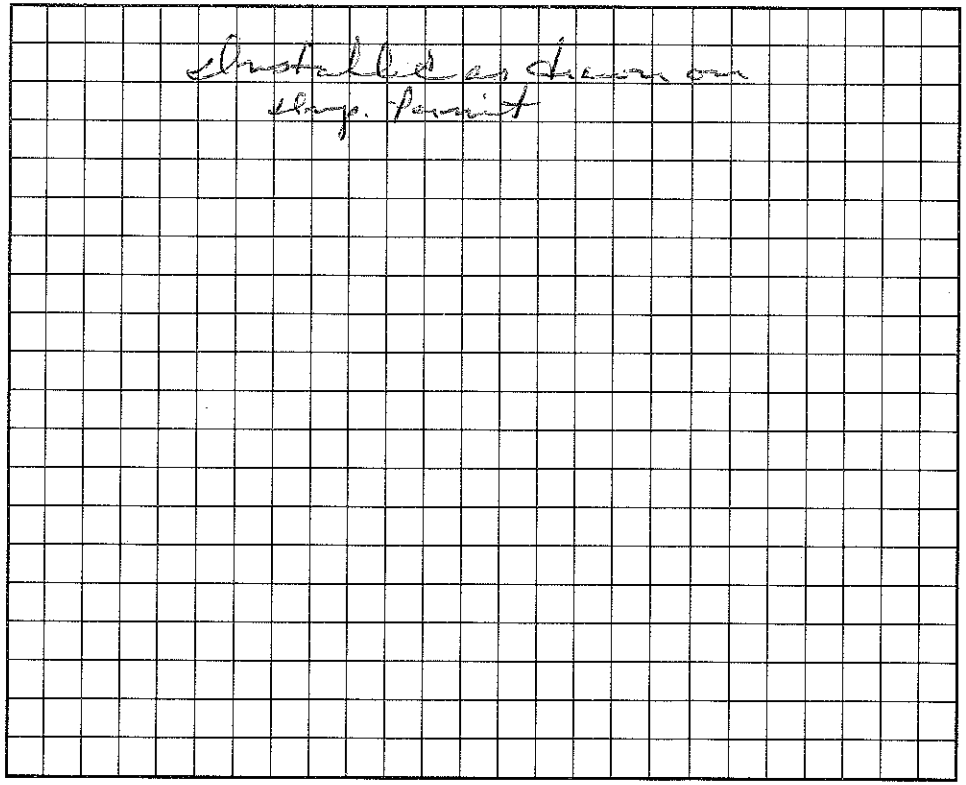
Comments:

Comments:

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: Debbie R. Hinson, RS date 10/20/94

Existing System Inspection by: date

Installed by: Little Hawkins

Certificate of Completion by: Wesley Sparks RS. date 12/13/94

Operation Permit by: date

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