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. 20289 DATE March 7, '95 TAX MAP NO. 2B5B57 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Robson Building PHONE: Business 4634-99-7092 Home

ADDRESS 8820 Ex Park suite 130, Charlotte

LOCATION Jonathan Rd TL Knollwood Lane on left

SUBDIVISION Knollwood BLOCK / SECTION LOT 57 LOT AREA 24682 ft² SITE CLASS. BS per 1996 DESIGN FLOW 450gpd L.T.A.R. .03

Septic Tank: 1000 Gallons; STB 994 Date 6/21/95

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 6/3+3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: gravity w/ filtrator

Repair System Description: stone or pumped conv/FM

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 3 No. Employees

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

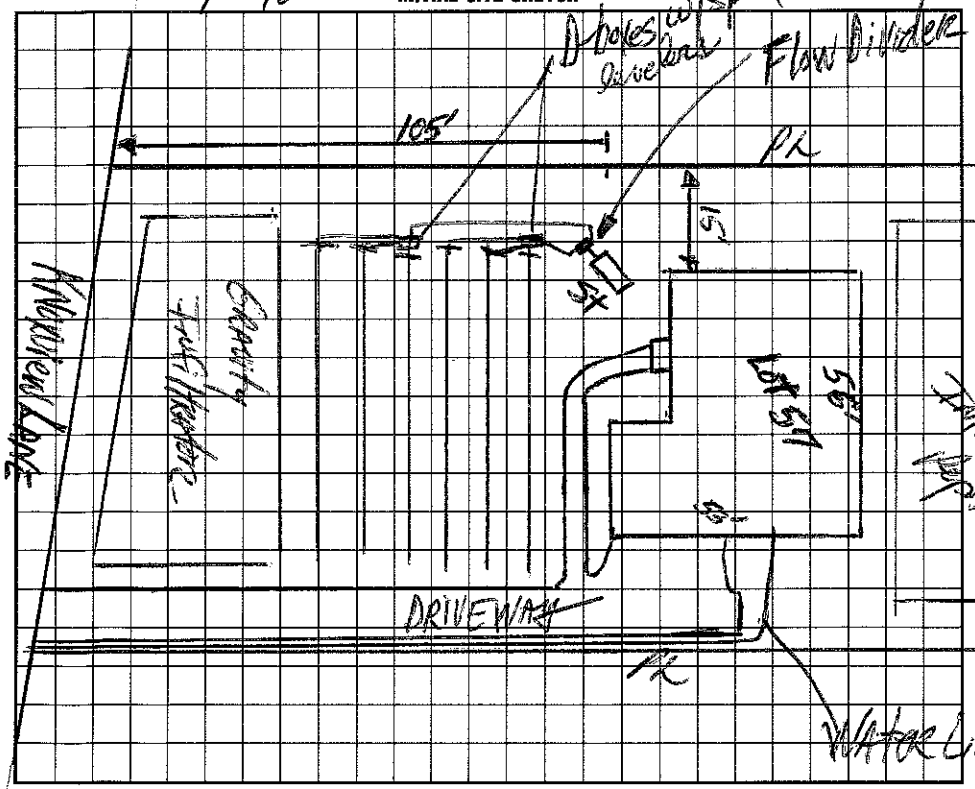
Water Supply: ☐ Individual ☑ Community ☐ Public

Comments: Filtrator laterals to follow contour

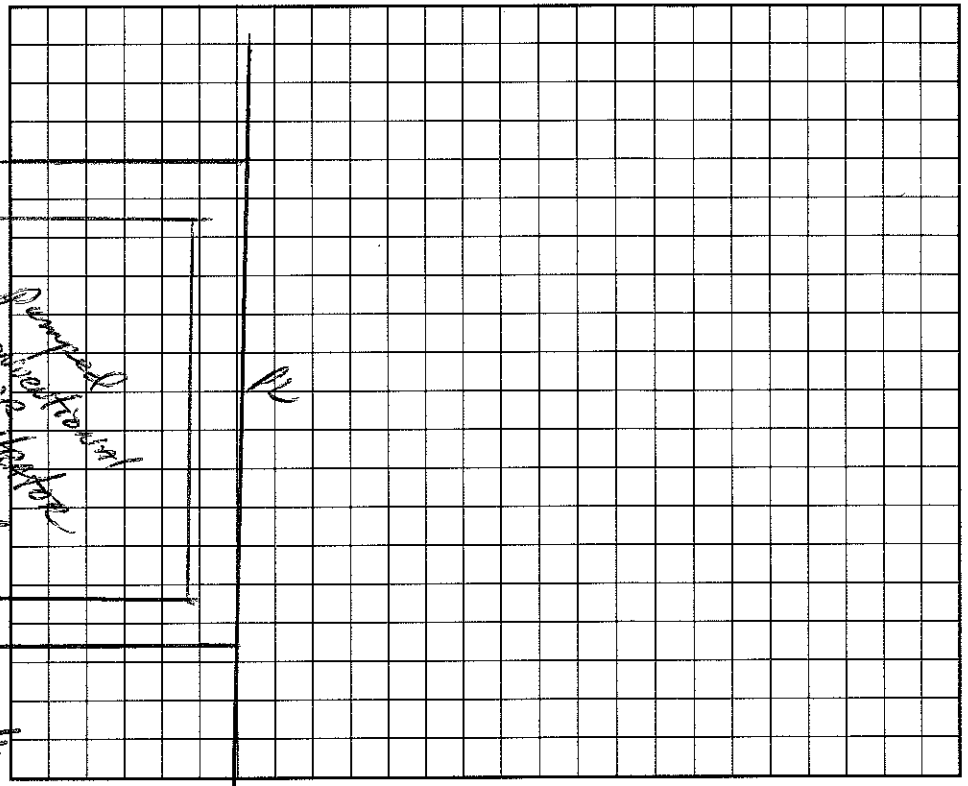
Comments:

INITIAL SITE SKETCH

1"=40'



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: X

Improvement Permit by: Peter R. Hamer IRS date 3/7/95

Existing System Inspection by: date

Installed by: Bobby Mayhew

Certificate of Completion by: Wesley Sparks R.S. date 8/9/95

Operation Permit by: date

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