4635 28 3468

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. 16535 DATE July 16, '93 TAX MAP NO. 2C23A63

OWNER OR CONTRACTOR M.I. Homes PHONE: Business 376-9800 Home

ADDRESS 1043 E. Morehead St. [redacted] Charlotte 28208

LOCATION 1100 Tr 1163 Tr Waterford Tr Rockwinnow (Highview) on Rt in Cul-d-Sac

SUBDIVISION Pine Isle BLOCK / SECTION LOT 63 LOT AREA SITE CLASS. I5 per 1936 L.T.A.R. .39 gal/ft²/day

Water Supply: ☐ Individual ☑ Community ☐ Public Gorilla

Septic Tank: 1000 Gallons; STB 358 ACP Date 9-17-93 WEOSIIH

Pump Tank: 1000 Gallons; PT 358 ACP Date 9-16-93 ½ HP HH

Nitrification Field: No. Fields 1 Square Feet Linear Feet 270

No. Lines 5 Trench Width 24" Trench Depth 30"-36" Gravel Depth NA

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

System Description: LP PPBPS

Repair System Description: SAME

Maintenance Agreement Required: ☑ Yes ☐ No

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

No. Bedrooms 4 No. Bathrooms 4 No. Employees

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

Garbage Disposal: ☑ Yes ☐ No

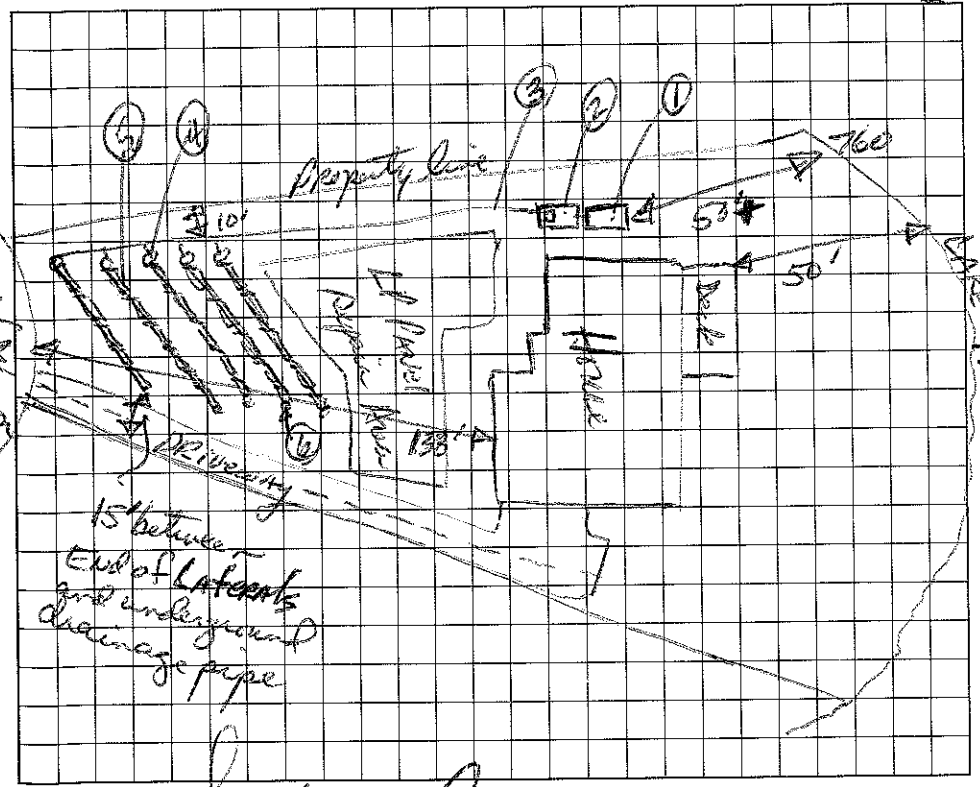
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

Other

Comments: ① Septic Tank, ② Pump tank w/ access risers, ③ 2" sch 40 supply manifold, ④ Ball/Gate valve per detail, ⑤ 16" PPBPS lateral, ⑥ Stand pipe w/ below grade valve layout, Locate tanks as shown and stay 10' only off left side property line, do not clear trees because available space for repair is likely "right" of panels 6 & 1 - Temp spec: 37 gallons at Approx. 20' head (One 3/16" hole per panel)

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: date 7/16/93

Existing System Inspection by: date

Installed by: Osborne (11-2-93)

Certificate of Completion by: date

Operation Permit by: date 12/3/93

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