4636187653

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. 1573 DATE Jan. 7, '94 TAX MAP NO. 2L 9A 19 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR C.W. Brewer PHONE: Business 663-4669 Home L.N.

ADDRESS PO Box 69, Mt. Mourne

LOCATION 1100, TR Blume then left on Beechtree, TR Meadow Creek Ln. 1st on Right

SUBDIVISION Springfield BLOCK / SECTION LOT 19 LOT AREA 1.64 ac SITE CLASS PS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000V Gallons; STB 825-RST Date 3-17-94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4 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: same

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

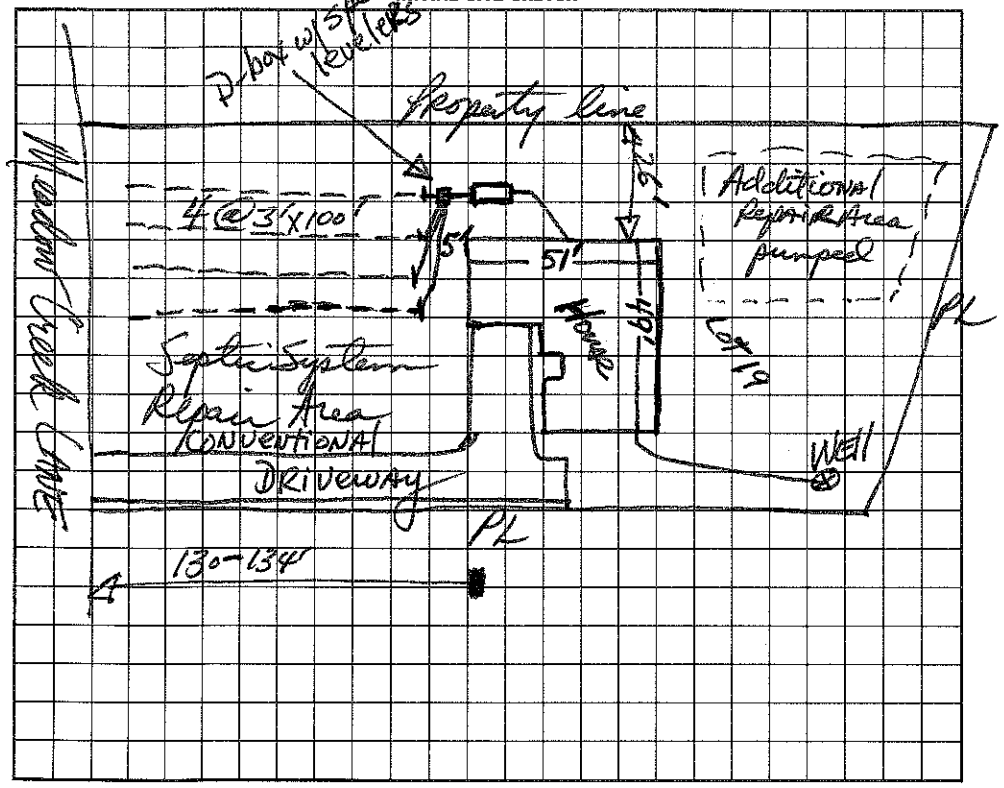
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

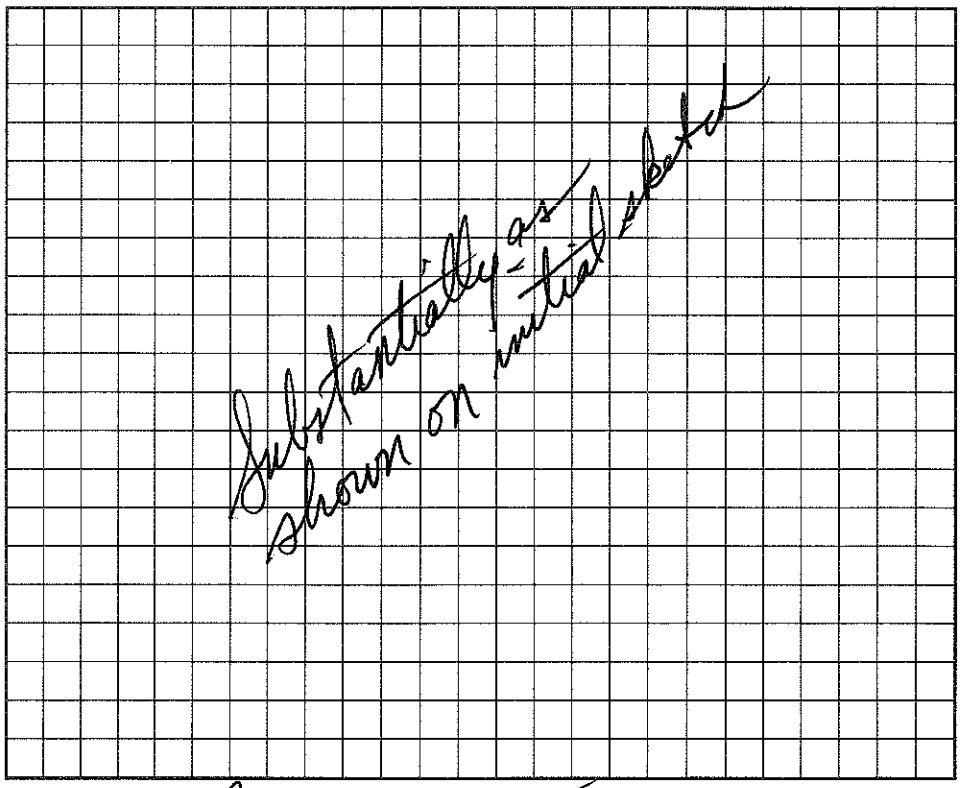
Comments:

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: Jane Brewer

Improvement Permit by: Jerrold R. Hinson RS date Jan 7, '94

Existing System Inspection by: date

Installed by: Richard Abernathy

Certificate of Completion by: Jerrold R. Hinson RS date 5/24/94

Operation Permit by: date

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