# IREDELL COUNTY HEALTH DEPARTMENT

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

4636879423

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

PROPERTY DESCRIPTION NO. 15235 DATE 7/15/93 TAX MAP NO. 2K 18A1

OWNER OR CONTRACTOR MALCOLM A CLARK PHONE: Business _____ Home 664-2114

ADDRESS R+6 BOX 573 MOORESVILLE, NC

LOCATION ST ANDREWS VILLAGE - 1100 TL 1179 TL TURNBERRY 1ST LOT ON (L)

SUBDIVISION ST ANDREWS BLOCK / SECTION _____ LOT 1 LOT AREA 20,600 FT² SITE CLASS. P L.T.A.R. .25-.3

Water Supply: ☐ Individual ☑ Community ☐ Public

Septic Tank: 1500 Gallons; STB 903 Date 5-5-93

Pump Tank: _____ Gallons; PT _____ Date _____

Nitrification Field: No Fields 2 Square Feet 600/600 Linear Feet 200/200

No Lines 10 Trench Width 36" Trench Depth 28-30" Gravel Depth 12"

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

System Description: CONVENTIONAL

Repair System Description: CONVENTIONAL

Maintenance Agreement Required: ☑ Yes ☐ No 5 YR.

☑ House/Mod. Home No. Bedrooms 3 Garbage Disposal: ☑ Yes ☐ No

☐ Mobile Home No. Bathrooms 2.5 Auto. Dishwasher: ☑ Yes ☐ No

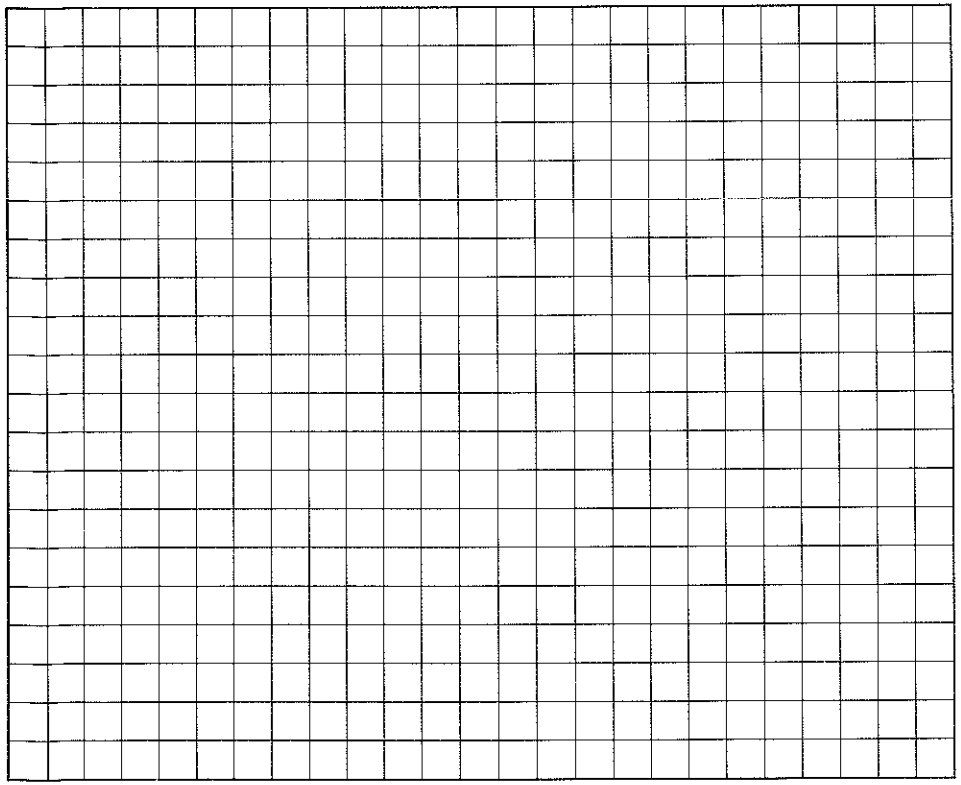
☐ Business No. Employees _____ Auto. Washing Machine: ☑ Yes ☐ No

☐ Other _____ Other _____

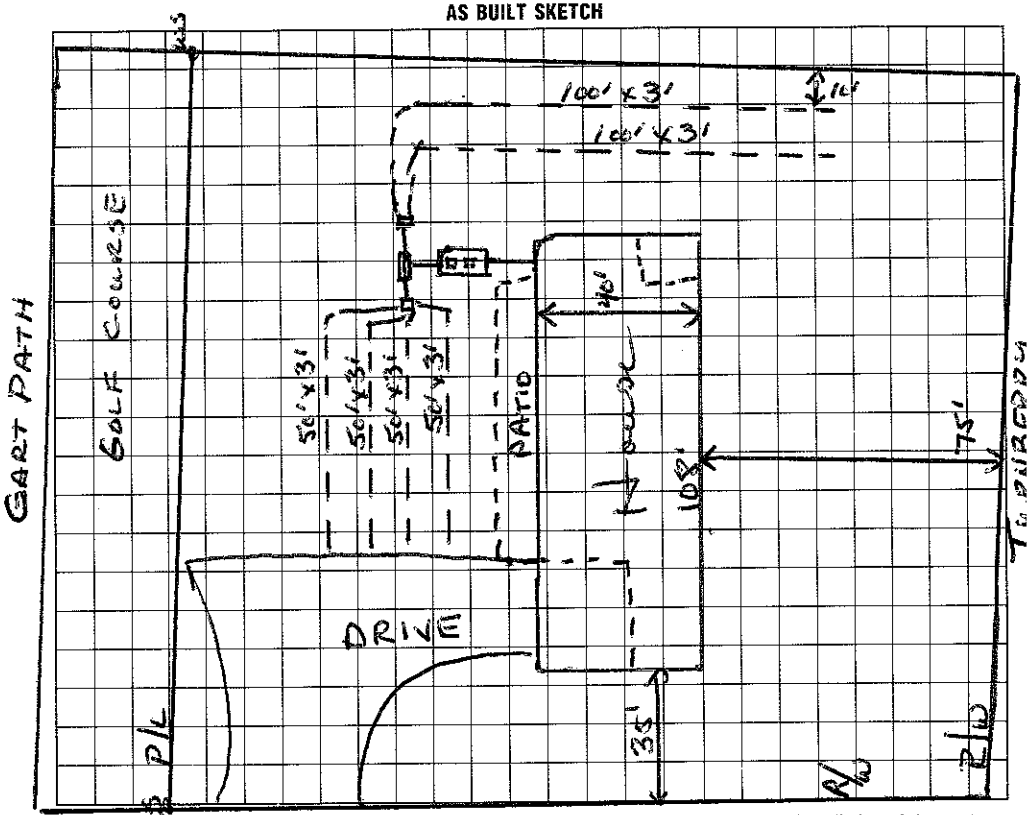
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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: _____ date _____

Existing System Inspection by: _____ date _____

Installed by: JULIAN BOWLES

Certificate of Completion by: Wesley Sparks RS. date 7/15/93

Operation Permit by: _____ date _____

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