IREDELL COUNTY HEALTH DEPARTMENT

Authorization to Construct

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

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

PROPERTY DESCRIPTION NO. 22022 DATE 10/24/95 TAX MAP NO. 2K 3A 58 PIN# 4636-95-9446 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR ~~John Austin~~ Dal WIMBISH PHONE: ~~Business~~ Home N/A

ADDRESS 367 Williamson Rd. Mooresville NC. 28115

LOCATION Conway Circle (L) Crystal Cir (2ND) (R) to 2ND lot on (R)

SUBDIVISION Crystal Bay BLOCK / SECTION LOT 58 LOT AREA ~.62 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .30

Septic Tank: 1000 Gallons; STB 825 Date 5/2/96
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 200*
No Lines 4 Trench Width 24" Max Trench Bottom Depth 34" Gravel Depth 6" SAND

☒ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: 16" PPBS
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

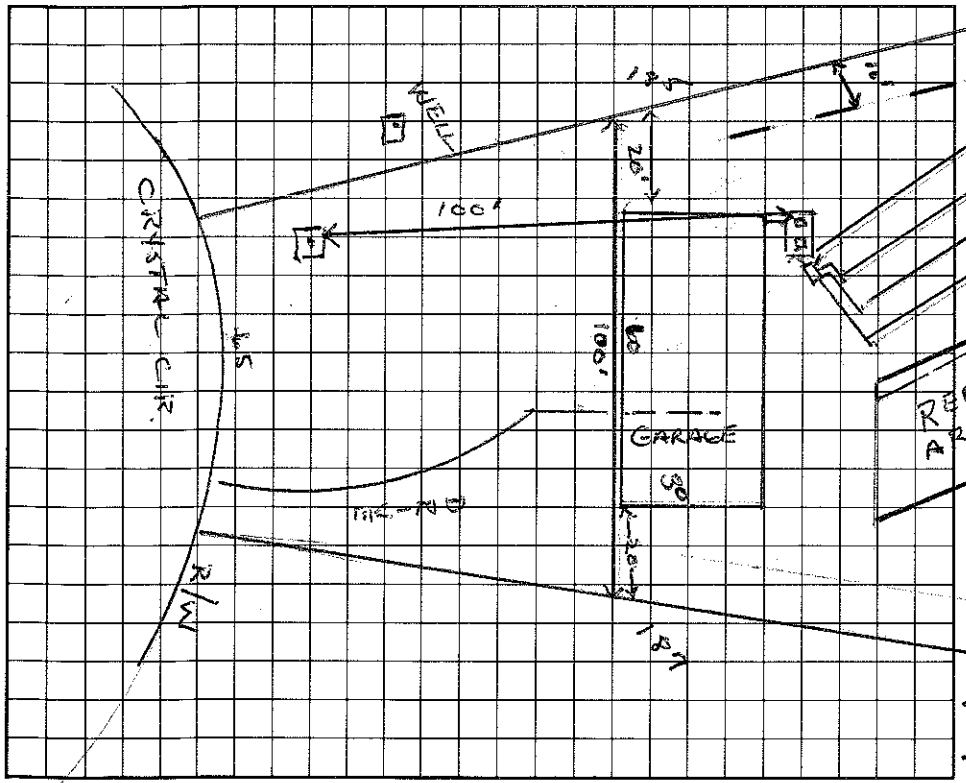
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

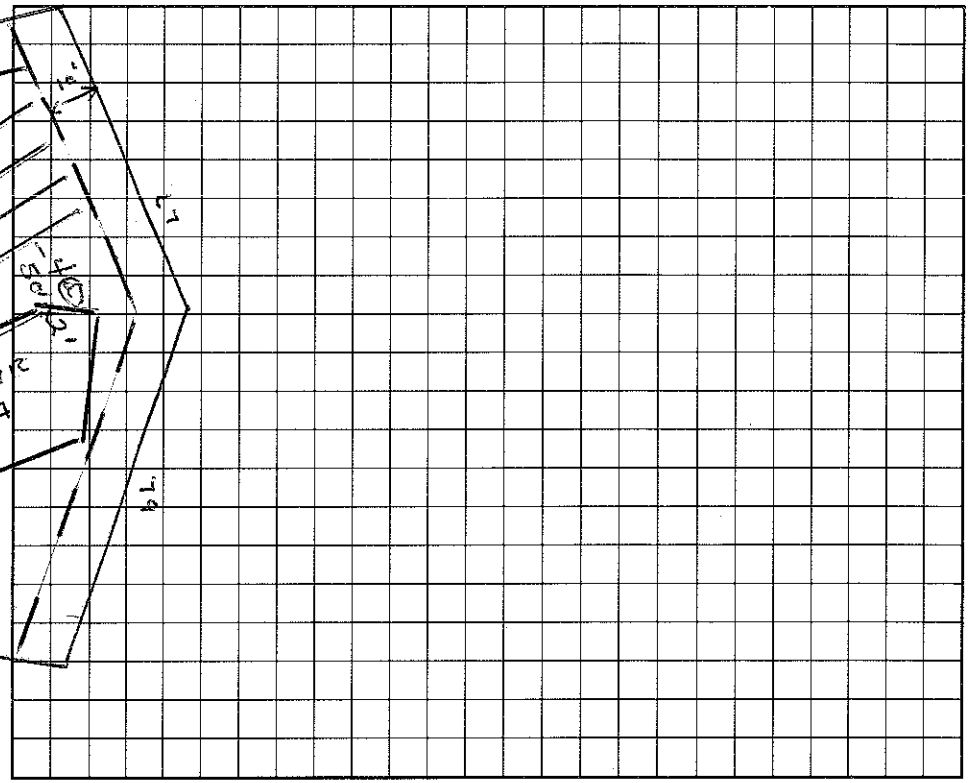
Comments: * 50% reduction for panel use
Well location must meet 2c WELL CONST. STANDARDS
Tight No room for seperate garage behind house

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.

Authorization to Construct valid for 5 years. Improvement Permit required.

Angela H. Sherrill

Wesley Sparks RS. date 10/24/95

date

Installed by: Barry Thompson

Certificate of Completion by: date

Operation Permit by: Wesley Sparks RS. date 6/21/96

INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWNER COPY (INITIAL): GOLD