IREDELL COUNTY HEALTH DEPARTMENT

4637072378

Wes Phillips - 892-3911 - 1-800-573-6899

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

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

PROPERTY DESCRIPTION NO. 16888 DATE sept. 30, 1993 TAX MAP NO. aN-A-20

OWNER OR CONTRACTOR Tom Wilson (VINCE ROGERS) PHONE: Business 704-663-5115 Home ~~DEVELOPED~~ Ready to Issue PERMIT Aug 5

ADDRESS rt 4 box 11 Mooresville, NC 28115

LOCATION on left side of ridge top road; from I-77 about 3 mi. west on south side of hwy 150

SUBDIVISION Spring Acres BLOCK / SECTION III LOT ~~66~~ 51 LOT AREA 0.63 ac SITE CLASS. P L.T.A.R. 0.3

Water Supply: ☒ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 794 Date 5/20/96

Pump Tank: 1000 Gallons; PT 27 Date 6/17/96

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

No Lines 5 Trench Width 36 Trench Depth 24 Gravel Depth 12

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

System Description: gravity conventional

Repair System Description: pressure PPBS

Maintenance Agreement Required: ☑ Yes ☐ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

Garbage Disposal: ☐ Yes ☒ No

Auto. Dishwasher: ☒ Yes ☐ No

Auto. Washing Machine: ☒ Yes ☐ No

Other

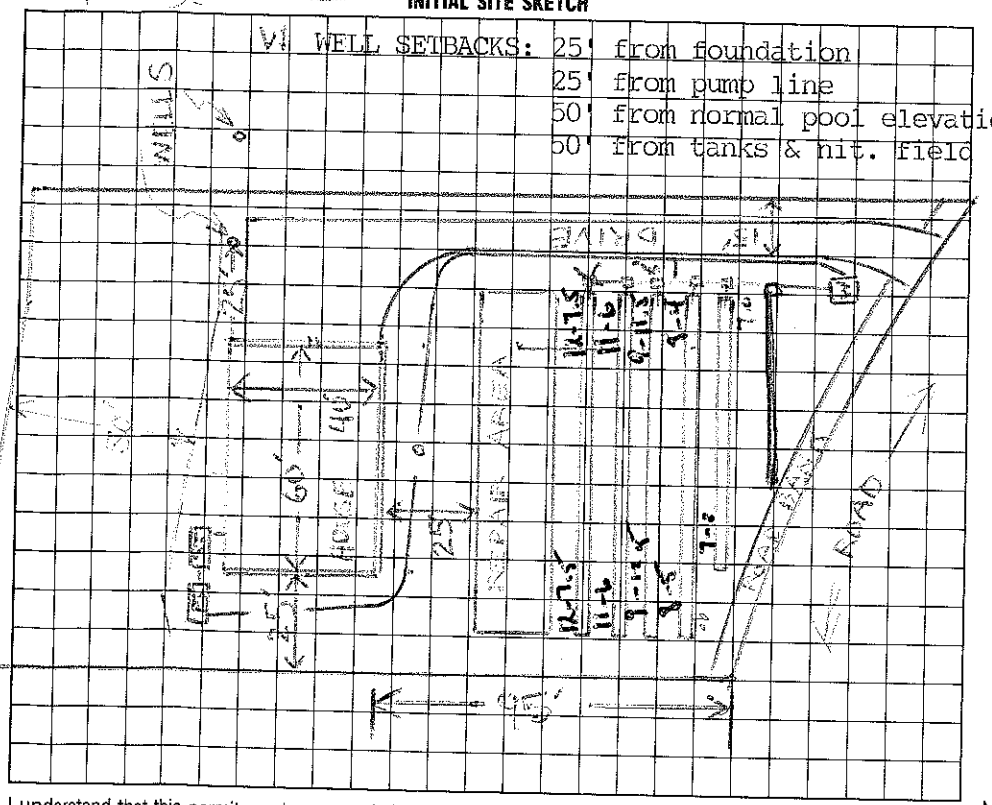
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments do not install during wet soil conditions or rain. additional instructions may be made upon reissue. fit pump line with turndown in washer box. septic tank and pump station installed per NCAC 15A 18A .1952

INITIAL SITE SKETCH

1" = 50'

WELL SETBACKS: 25' from foundation
25' from pump line
50' from normal pool elevation
50' from tanks & nit. field



← LAKE N.

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: Wanda Young Wesley Sparks 9/20/96

Improvement Permit by: date

Existing System Inspection by: date

Installed by: Ray Beam

Certificate of Completion by: date

Operation Permit by: Wesley Sparks RS date 10/4/96

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