IREDELL COUNTY HEALTH DEPARTMENT

Authorization to Construct (4100)

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

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

PROPERTY DESCRIPTION NO. 24198 DATE 6/24/96 TAX MAP NO. 2P 14 A 16 & 17 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Michael Nesbit PHONE: Business 4637467209 Home 644-3847

ADDRESS 320 Chuckwood Rd. Mooresville NC.

LOCATION 150 W TL Dooley Rd. TR Whipporwill TR Kingfisher cul de sac 2 lots on ®

SUBDIVISION Whipporwill BLOCK / SECTION 1 LOT 16 & 17 LOT AREA ~3AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1017 Date 5/26/97

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: GRAV - CONVENTIONAL SYSTEM

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☒ No

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

No. Bedrooms 3 No. Bathrooms 2.5 No. Employees _____

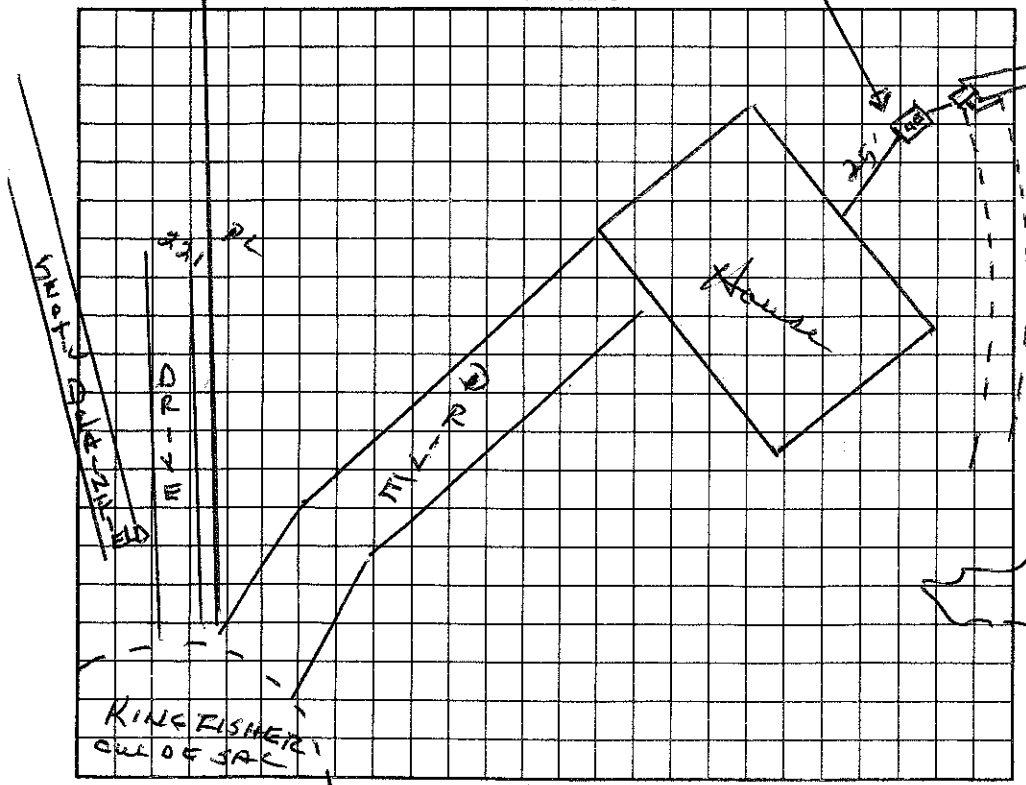
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

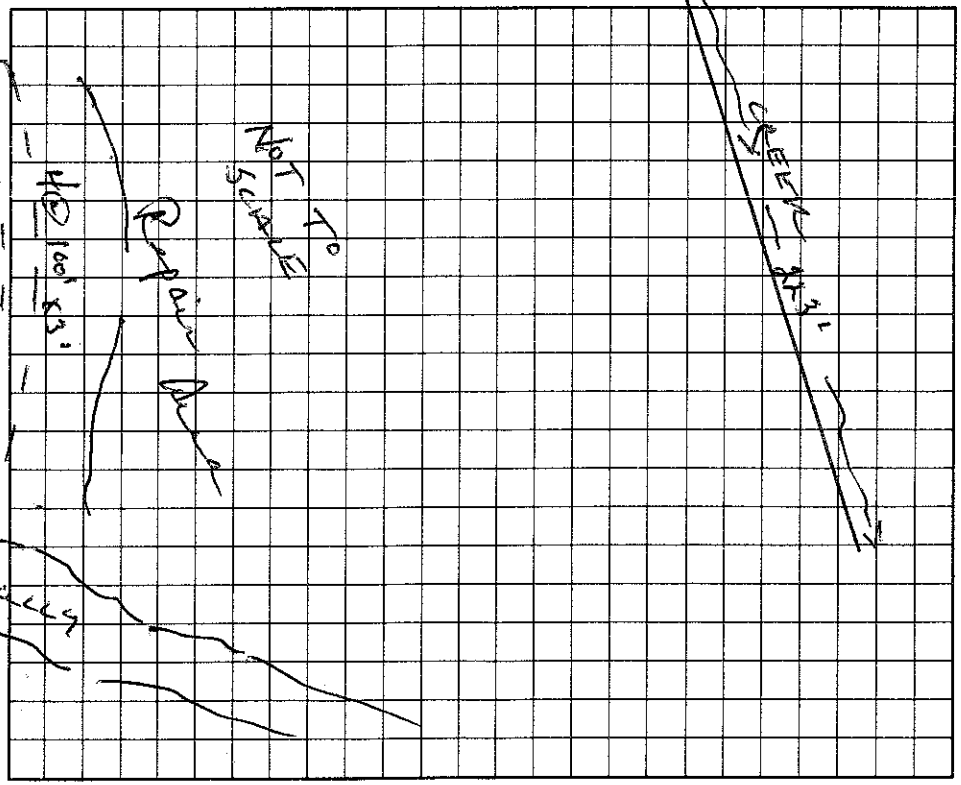
Comments:

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.

Signed: Lisa Nesbit

Improvement Permit by: Wesley Sparks R.S. date 6/24/96

Authorization to Construct by: Wesley Sparks date 6/24/96

Installed by: FOREST SHAFFORD

Certificate of Completion by: _____ date _____

Operation Permit by: [signature] date 10/3/97

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