# IREDELL COUNTY HEALTH DEPARTMENT

Const. Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 068307 DATE Aug 2, '97 TAX MAP NO. ~~4638723651 (pt.)~~ 4634723525 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Don Wimbish PHONE: Business _____ Home 6064-772 MSTIICA

ADDRESS P.O. Box 733 Mooresville

LOCATION Perth Rd N. on left just past airport entrance (before Normandy Rd.)

SUBDIVISION _____ BLOCK / SECTION _____ LOT 1 LOT AREA .75Ac SITE CLASS. S DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 521 Date 9/11/98

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3@100 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth NA

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

System Description: Gravity plastic Chambered

Repair System Description: Same

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home DW No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

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

Water Supply: ☑ Individual ☐ Community ☐ Public

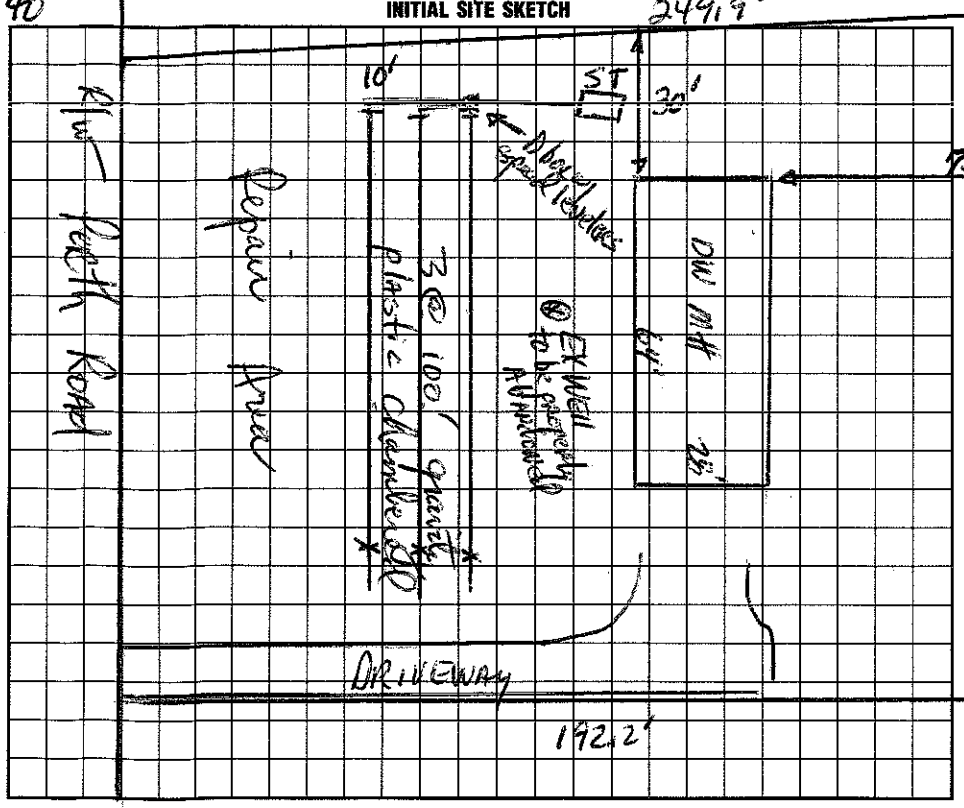
Comments: * ONE INSPECTION port per LATERAL

EXISTING WELL to be properly abandoned prior to issuance of Operation Permit; Written certification of well abandonment (DEHNR form) to be provided to this dept.

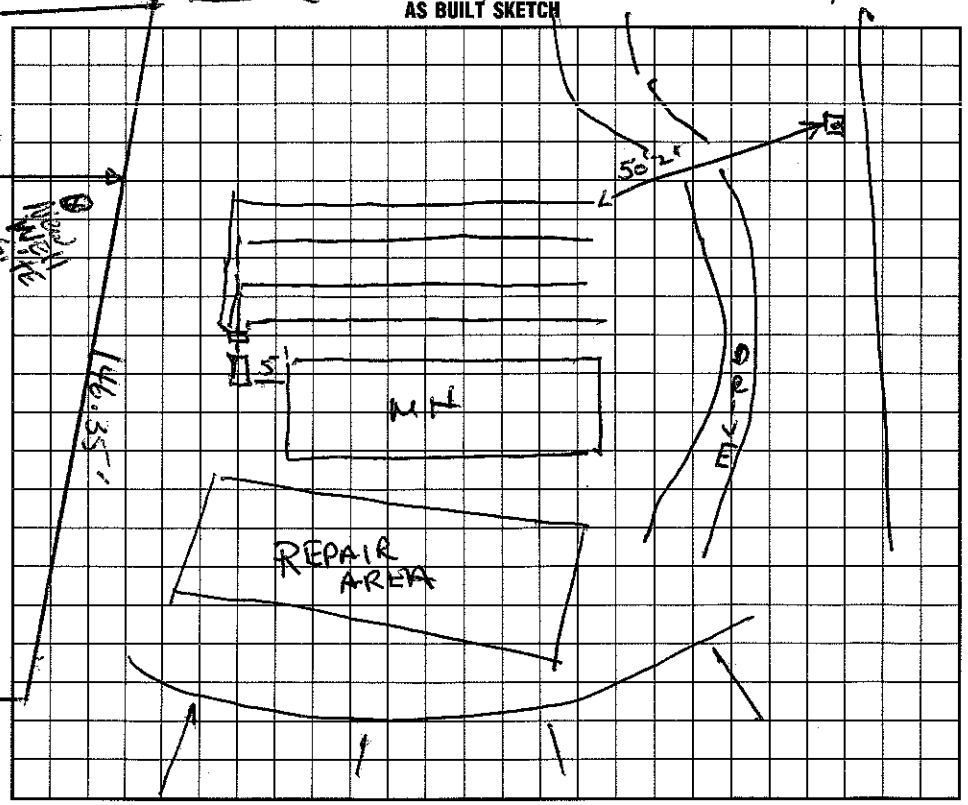
Comments: PERTH RD.

1" = 40'

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: D Hyman, RS date 8-2-97

~~Existing System Inspection by:~~ Construction Authorization: D Hyman, RS date 8-2-97

Installed by: D+M

Certificate of Completion by: Wesley Sparks RS. date 10/16/98

Operation Permit by: Wesley Sparks RS. date 10/16/98

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