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 664-7727 WESTECA

ADDRESS P.O. Box 733 Mooresville

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

SUBDIVISION _____ BLOCK / SECTION _____ LOT 1 LOT AREA .75 Ac SITE CLASS. B DESIGN FLOW 360 gpd 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 N/A

☑ 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

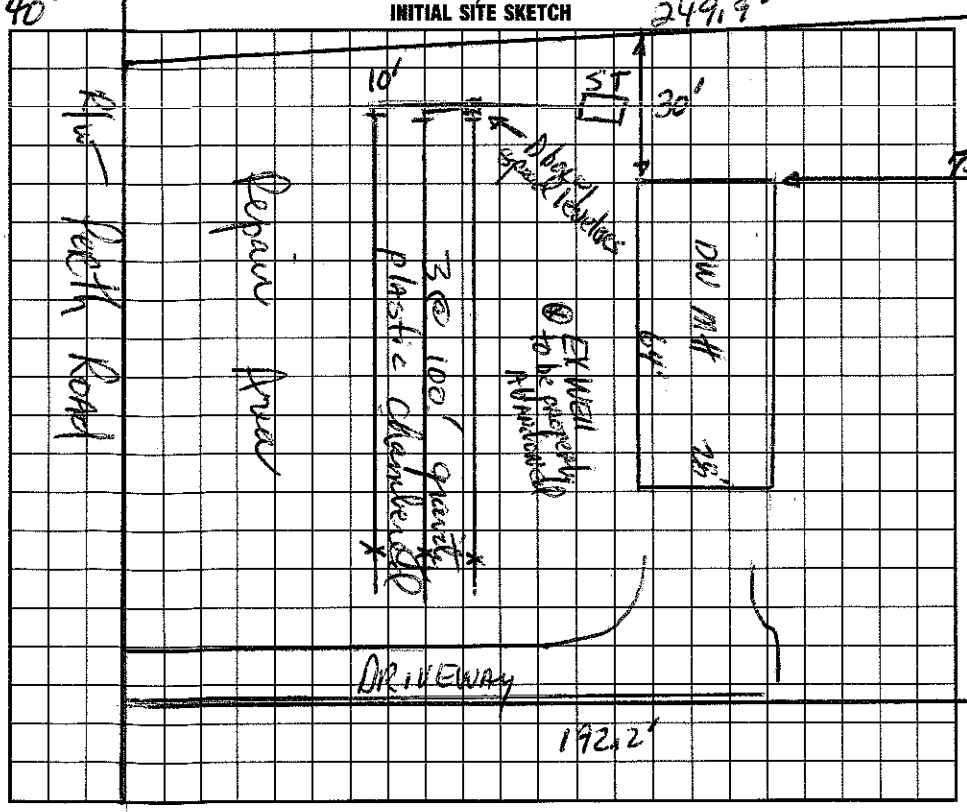
Comments: * ONE INSPECTION PORT PER LATERAL

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.

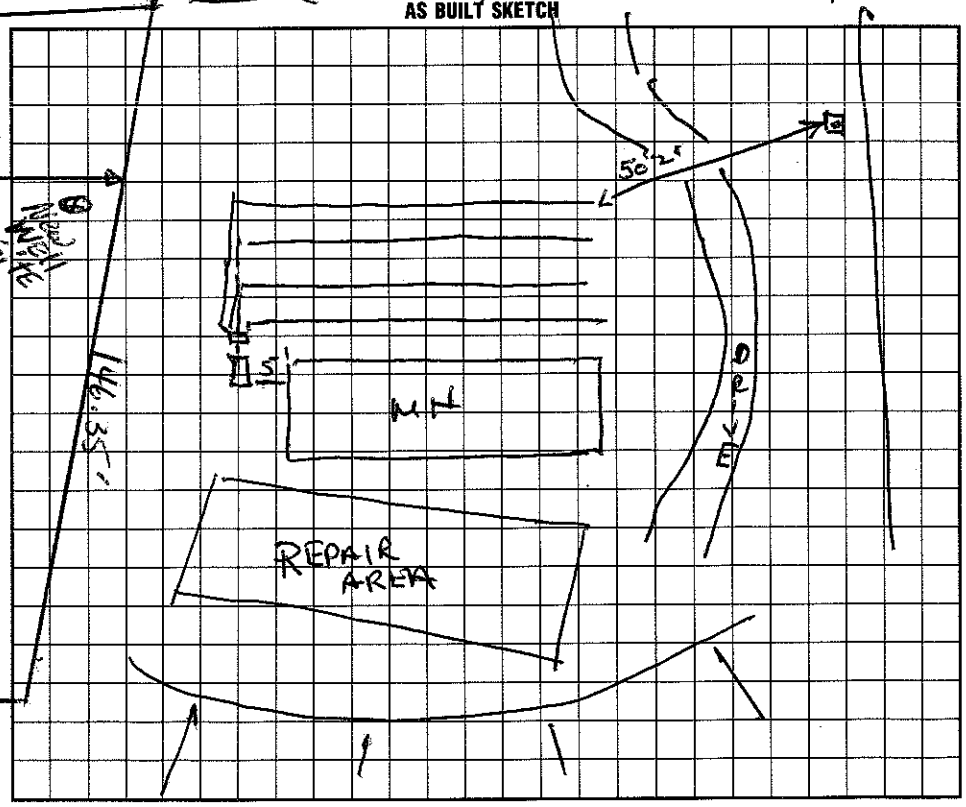
Comments:

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. Wimbish, RS date 8-2-97

~~Existing System Inspection by:~~ Construction Authorization: D. Wimbish, 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