IREDELL COUNTY HEALTH DEPARTMENT

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

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECT.

PROPERTY DESCRIPTION NO. ZZ203 DATE Jan 30, '96 TAX MAP NO. part of 2SA51 Watershed: ☑ Yes ☐

OWNER OR CONTRACTOR Krom Financial PHONE: Business _____ Home _____

ADDRESS 149 Yacht Cove Rd. Mooresville 4638-99-1823

LOCATION Cornelius Rd Turn on Creekview TL Mitbros. Ln. on Right

SUBDIVISION Mills Pond BLOCK / SECTION _____ LOT 80 LOT AREA .53 Ac SITE CLASS. PS.1952 DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 10/1/96

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 4@ n100' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: grav/pumped Infiltrator

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

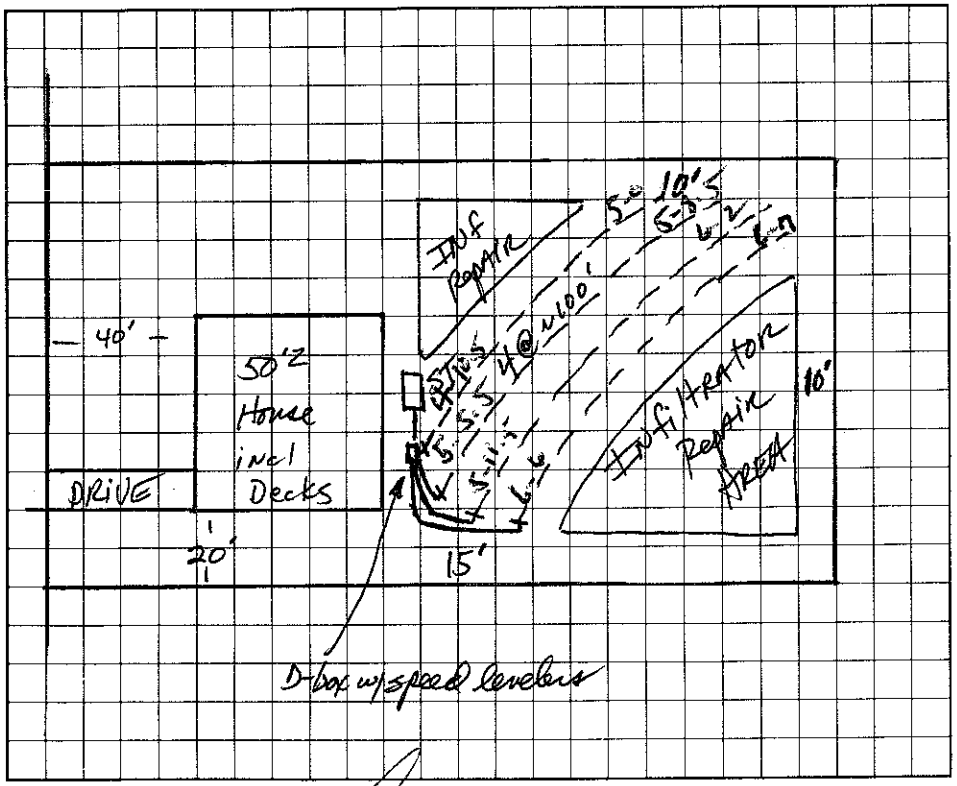
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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: _____

Improvement Permit by: David R. Hinson, RS date Jan 30, '96

Existing System Inspection by: DR Hinson, RS date Jan 30, '96

Authorization to construct

Installed by: Rowan Septic Tank

Certificate of Completion by: _____ date _____

Operation Permit by: Wesley Sparks R.S. date 11/19/96

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