4639367801

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PROPERTY DESCRIPTION NO. 21634 DATE 10/6/95 TAX MAP NO. 3C 1 A 3 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Rob Johnston PHONE: Business _____ Home 528-0765

ADDRESS 607 Wayfarer 330 Tennessee Cir Mooresville, NC.

LOCATION Tennessee Cir off Fern Hill Church to 3rd lot on L

SUBDIVISION Tennessee Cir BLOCK / SECTION _____ LOT 3 LOT AREA .92 Ac SITE CLASS. P3 DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 10/4/96

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533 (400)*

No Lines 5 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: INFILTRATOR

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

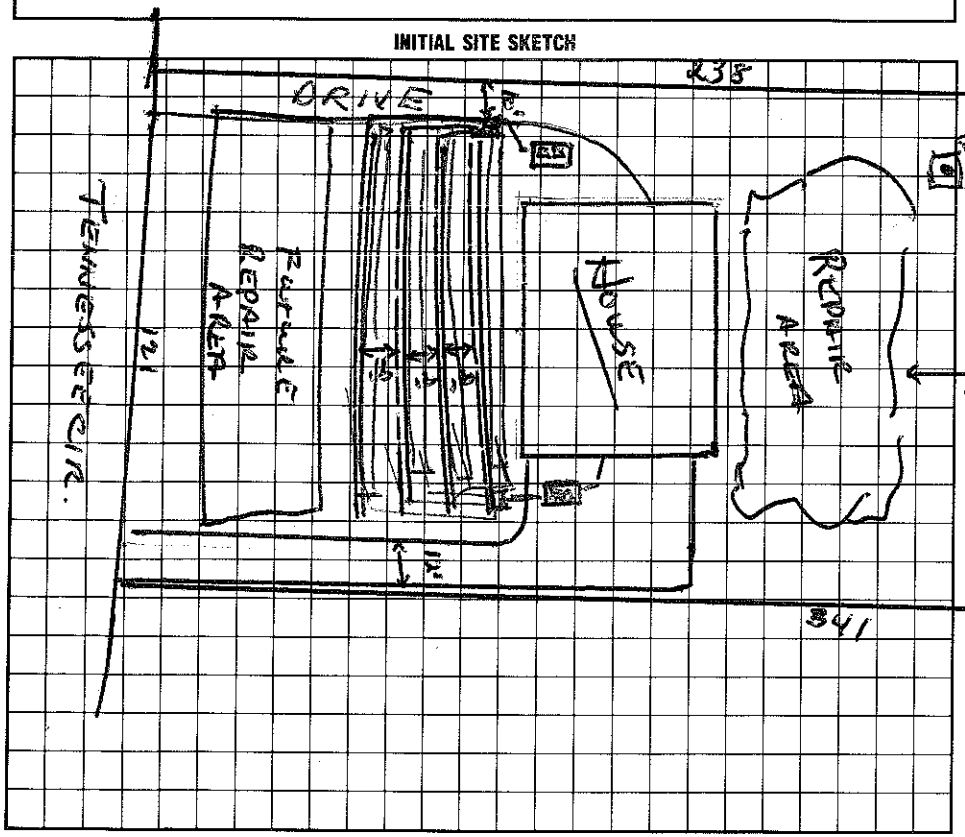
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

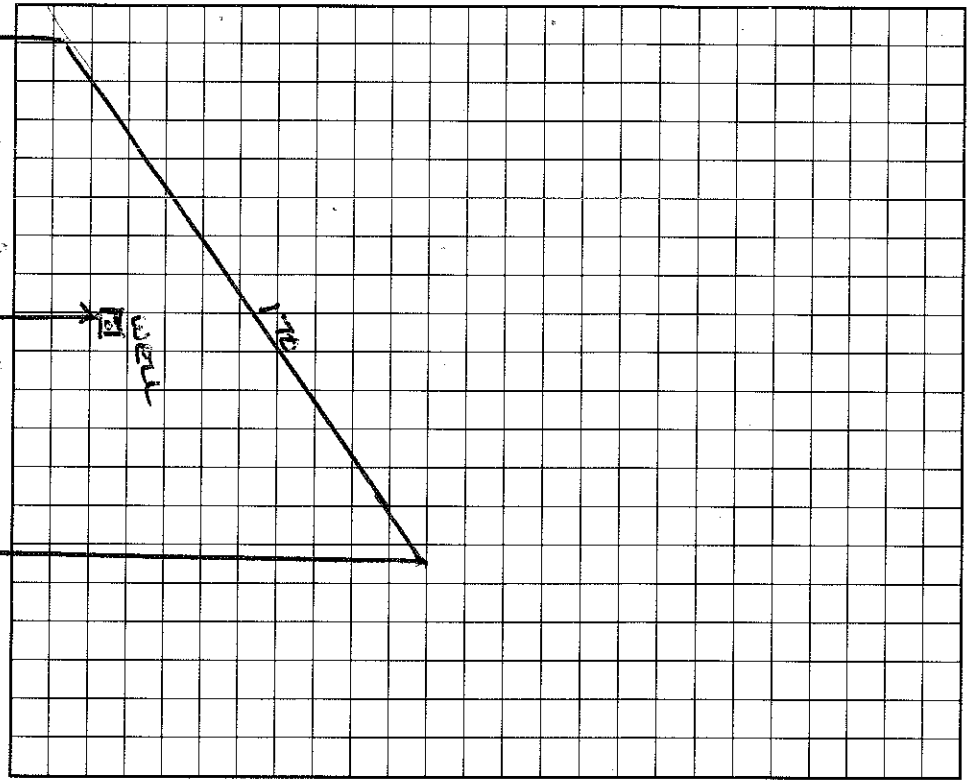
Comments: * 400 INFILTRATOR

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: Wesley Sparks date 10/6/95

Authorized Agent for Existing System Inspection by: Constant Wesley Sparks date 10/6/95

Installed by: F J Ervin

Certificate of Completion by: _____ date _____

Operation Permit by: Wesley Sparks RS. date 12/5/96

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