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. 17800 DATE Feb 25, '94 TAX MAP NO. 2H 11B-3 Watershed: ☑ Yes ☐ No L.N.

OWNER OR CONTRACTOR Ashwin Nagarwadia PHONE: Business Ray Kelly 892-3556 Home

ADDRESS Ray Kelly - Builder P.O. Box 117 Mt. Mourne

LOCATION 198 (Templeton Rd.) TL Mt. Mourne 1st entrance into Queens Cove on left corner lot of Hopewell & Queens Circle

SUBDIVISION Queens Cove BLOCK / SECTION — LOT 3 LOT AREA ~3 AC SITE CLASS. RS DESIGN FLOW 450 gpd L.T.A.R. .025 - 32 gal/SF/D

Septic Tank: 1000 Gallons; STB 747 Kelly Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1800 Linear Feet 600

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: pumped conventional

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

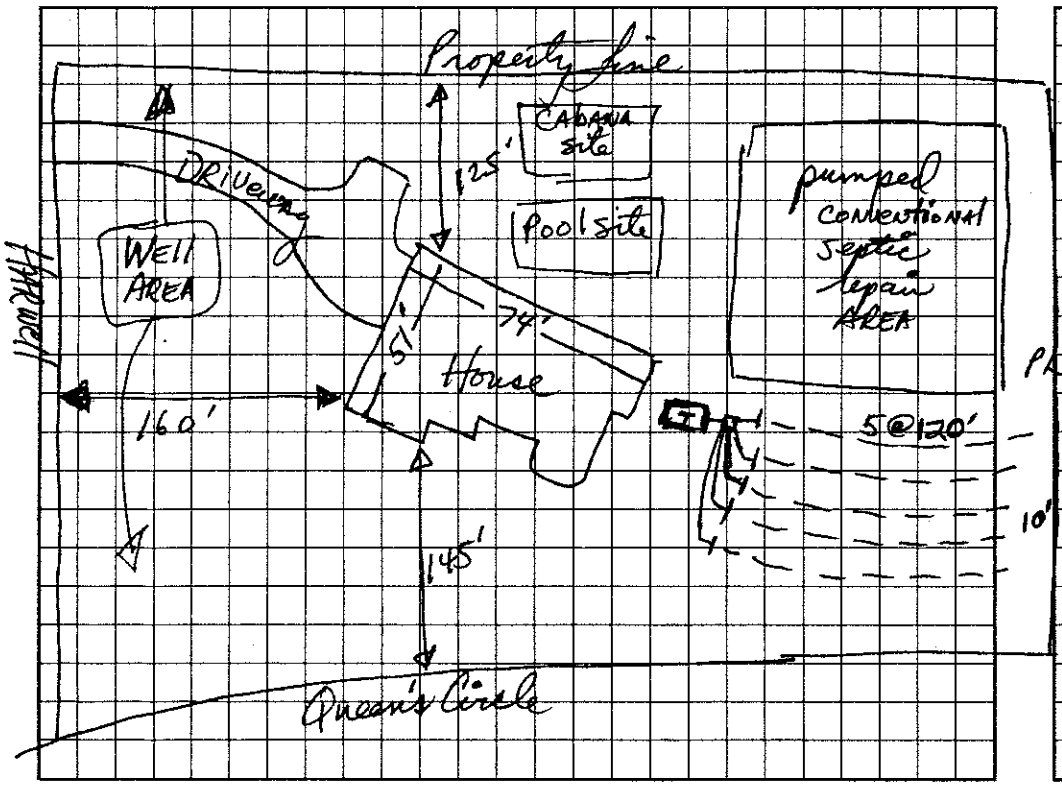
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

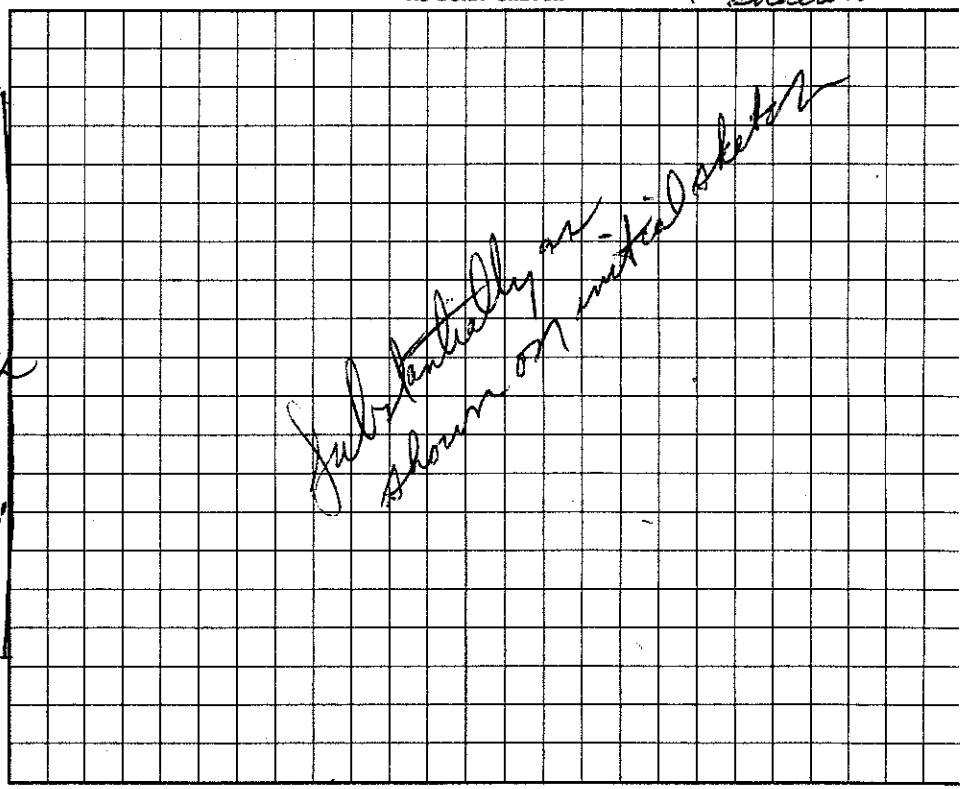
Comments: follow contour with laterals.

Comments: Rems installed in last half of laterals 1, 3, 4 & 5 due to excessive trench bottom grade. Corrugated pipe w/gravel envelope used between 2 by 4 "washing" trench. Need septic cover on ends. Ditch shallow where shallow

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: Ray Kelly

Improvement Permit by: Jack R. Hinson IRS date 2/25/94

Existing System Inspection by: date

Installed by: Cornelius Grading

Certificate of Completion by: Jack R. Hinson, RS date 9-15-94

Operation Permit by: date

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