# IREDELL COUNTY HEALTH DEPARTMENT

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

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

4645661555

PROPERTY DESCRIPTION NO. 23199 DATE 4/3/96 TAX MAP NO. 2H 12 A 12

OWNER OR CONTRACTOR Richard Roberts PHONE: Business 892-0810 Home

ADDRESS 20631 Island Ford Dr. Davidson NC. 28036 Watershed: X Yes ☐ No

LOCATION Poplin Dr. TR off Neave Rd. to 2ND lot on (R)

SUBDIVISION Waters Edge BLOCK / SECTION LOT 12 LOT AREA ~1.5AC SITE CLASS. P5 DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: Existing Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Existing Linear Feet

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

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

System Description: Existing System

Repair System Description:

Maintenance Agreement Required: ☐ Yes X No

X House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

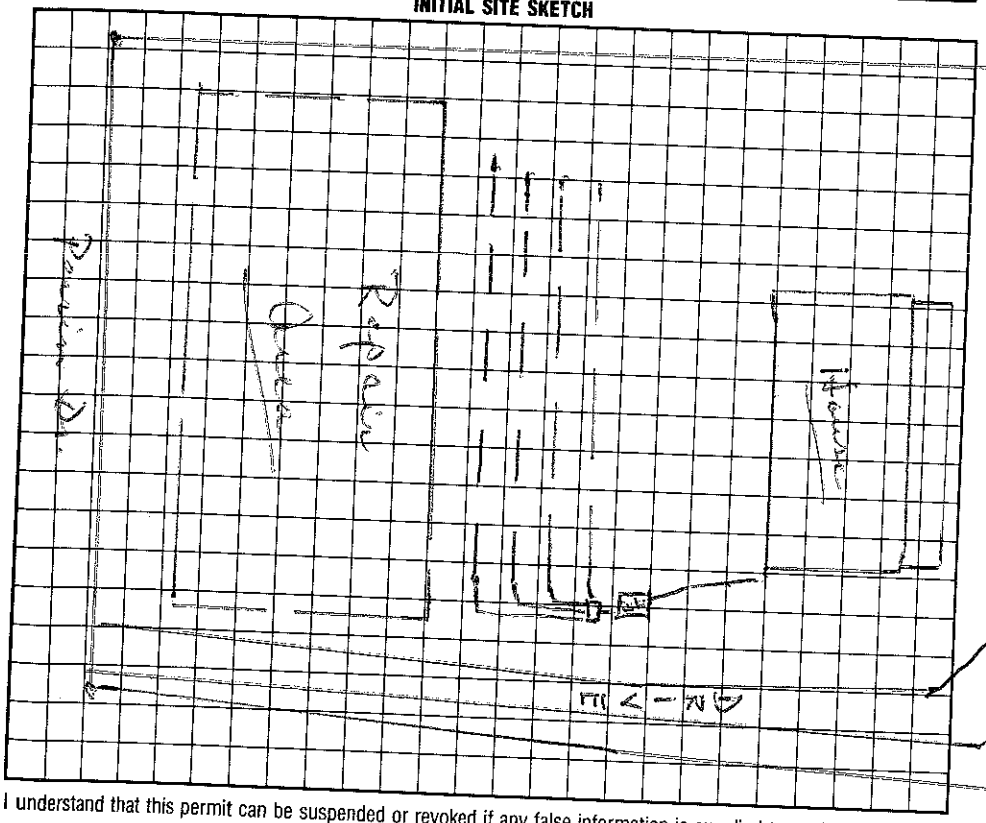
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: X Individual ☐ Community ☐ Public

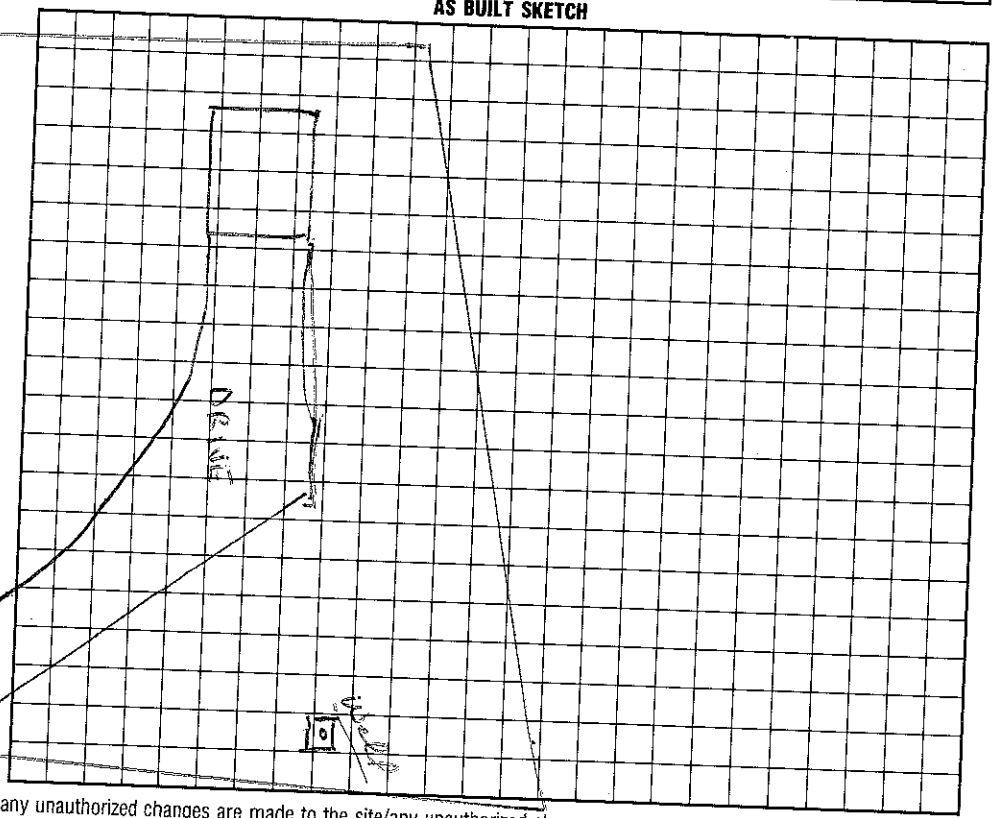
Comments:

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: date

~~Existing System Inspection by:~~ date

Installed by:

Certificate of Completion by: E. Wesley Parks R.S. date 4/3/96

Operation Permit by: date

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