IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 4646-27-7249 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 20659 DATE 5/18/95 TAX MAP NO. ~~2K B27 Pt of~~ Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Genesis Development PHONE: Business 478-2952 Home

ADDRESS PO Box 44 Sherrills Ford, NC.

LOCATION Sundance Rd. Rt on Sherrills Ford Dr. to 3 lot on (R)

SUBDIVISION LAKE VISTA BLOCK / SECTION 1 LOT 3 LOT AREA ~.8 AC SITE CLASS. P DESIGN FLOW 480 L.T.A.R. .3

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

Pump Tank: 1000 Gallons; PT 49 Date 11/26/97

Pump Make: MYERS Model ME100 Serial No. 1096 ~~x~~

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533 (266)

No Lines 05 Trench Width 24" Max Trench Bottom Depth 30" Gravel Depth 6" STONE

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

System Description: Pressure Panel

Repair System Description: None

Maintenance Agreement Required: ☒ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 4-3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

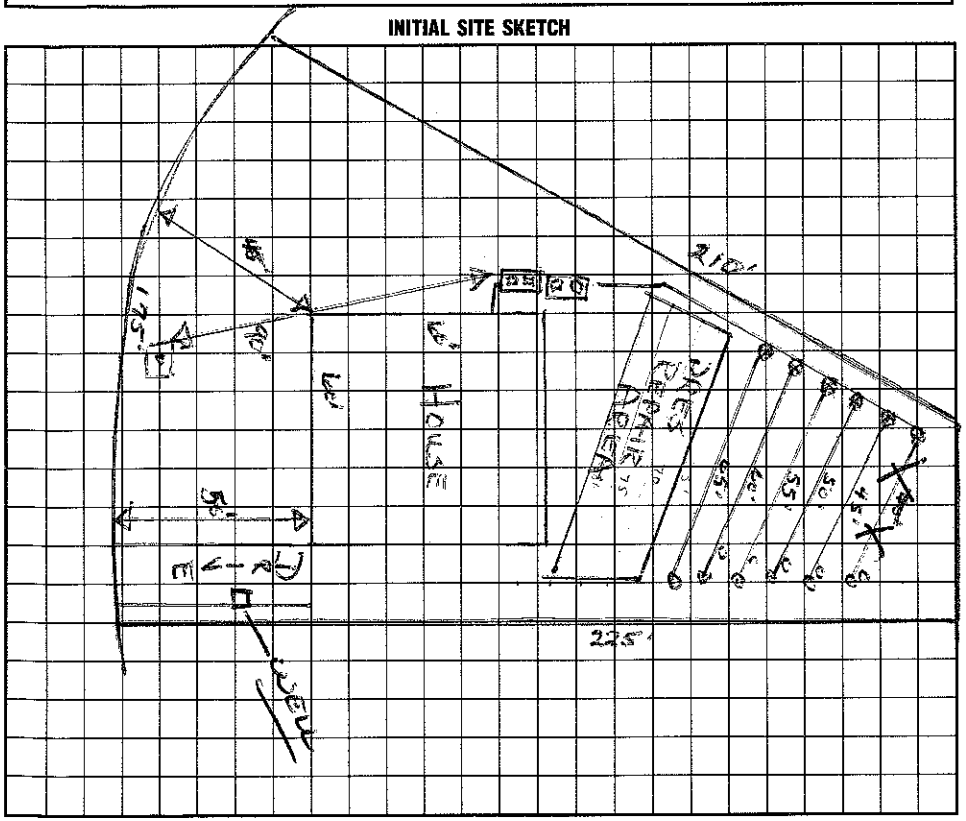
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: ~~X~~ 16" Pressure Panel
~~X~~ No More than 175 Gal / Dose 2' ASI per drainline, 3/16" holes one per panel.

Comments: Pressure set - 22-23" per Letterd
Final Inspection

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: Earle Fleming

Improvement Permit by: Wesley Sparks R.S. date 5/18/95

Existing System Inspection by: _____ date _____

Installed by: Aron Horney Bradley

Certificate of Completion by: Wesley Sparks R.S. date 4/16/97

Operation Permit by: Wesley Sparks R.S. date 4/16/97

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