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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. 16930 DATE Sept-21, '93 TAX MAP NO. 2K-A-8

OWNER OR CONTRACTOR David & Carolyn Young PHONE: Business Home 664-3398

ADDRESS RT 7 Box 110 Mooresville

LOCATION SR 1100 past Brawley School Rt 1st gravel road after passing under large power line on left

SUBDIVISION Cleage prop. BLOCK / SECTION LOT 1 LOT AREA 1.52 Ac SITE CLASS. 4S T.T.A.R. 2.35

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 794 Dellinger Date 2-22-94

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet 1050 Linear Feet 350

No Lines 4 Trench Width 36" Trench Depth 24" 30" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2½ No. Employees

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

Garbage Disposal: ☐ Yes ☑ No

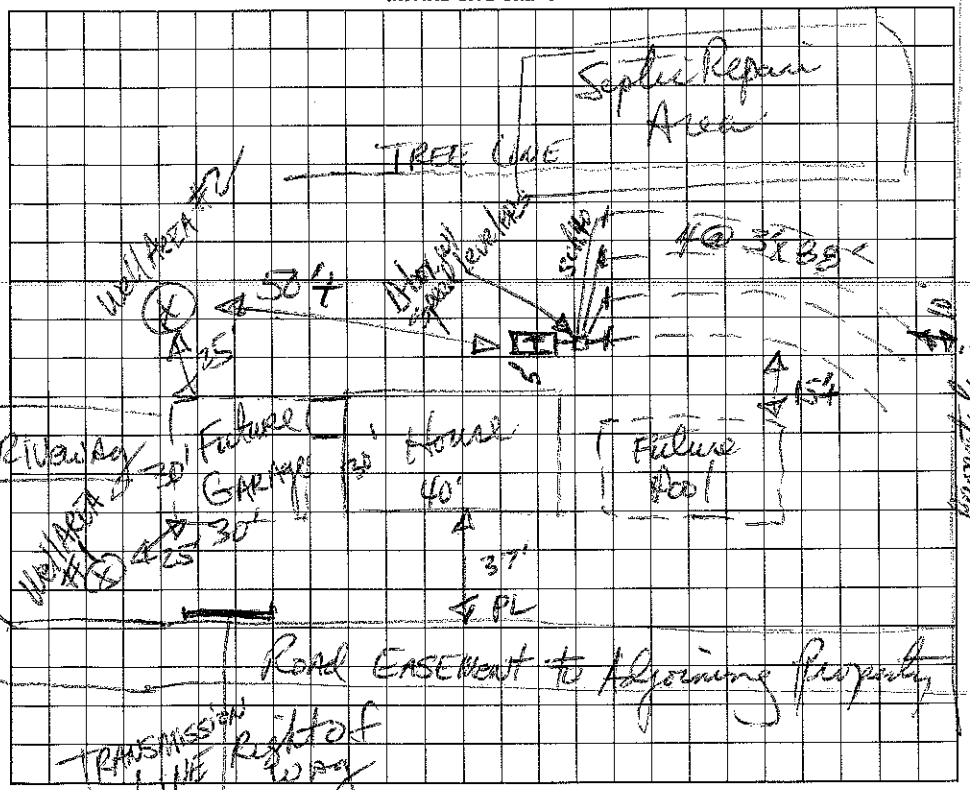
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

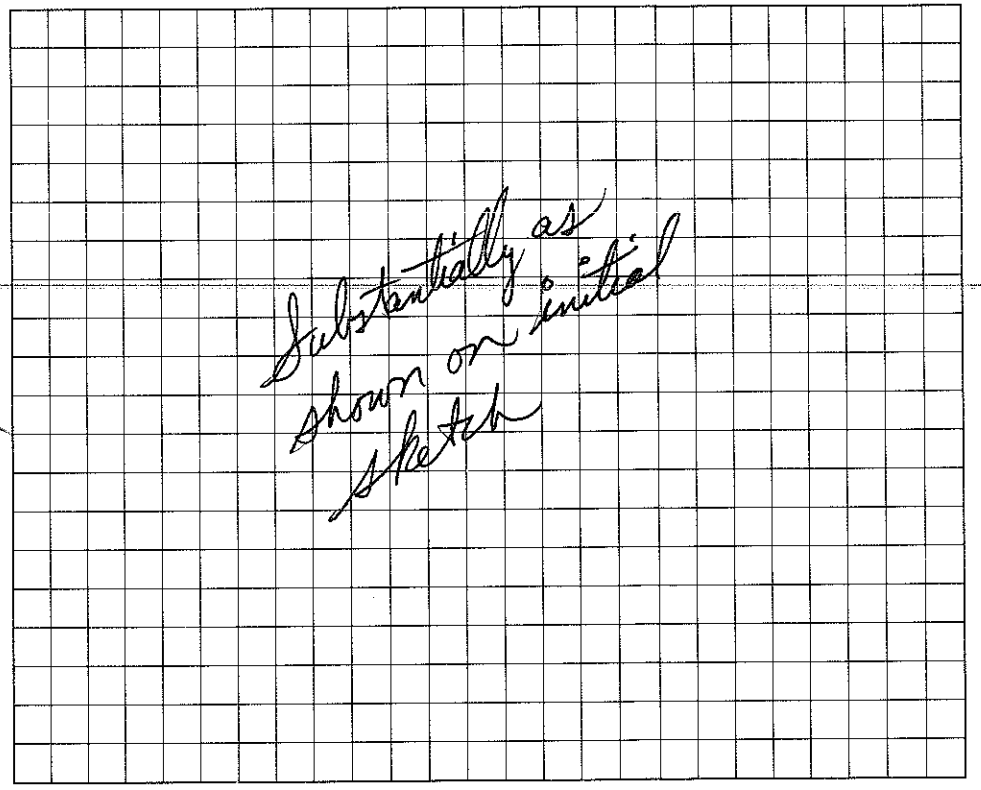
Other

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. Improvement Permit is valid for 60 months from date of issuance.

Signed: X Carolyn D Young

Improvement Permit by: Jack D Hanson, RS date 9/21/93

Existing System Inspection by: date

Installed by: Dennis Gallihen

Certificate of Completion by: David R Hanson RS date 4/26/94

Operation Permit by: date

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