3,00

IREDELL COUNTY HEALTH DEPARTMENT Const Auth. STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 068889 DATE Sept. 3, '97 TAX MAP NO. 4647 06153 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Jeff Pelchat PHONE: Business 528 3999 Home

ADDRESS PO Box 749, Troutman

LOCATION Brawley Sch Rd. TL Farmstead Ln. ~ ¼ mile on Right (# 244)

SUBDIVISION FARMSTEAD BLOCK / SECTION 2 LOT 42 LOT AREA > 20,000 ft² SITE CLASS. RS DESIGN FLOW 360 gpd L.T.A.R. 1.25

Septic Tank: 1000 Gallons; STB 1015 Date 9/5/97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 500 Linear Feet 250

No Lines 5@50' Trench Width 24"+ Max Trench Bottom Depth 30" Gravel Depth N/A

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

System Description: gravity panel & block

Repair System Description: pumped shallow conv / LPP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees

☐ Other

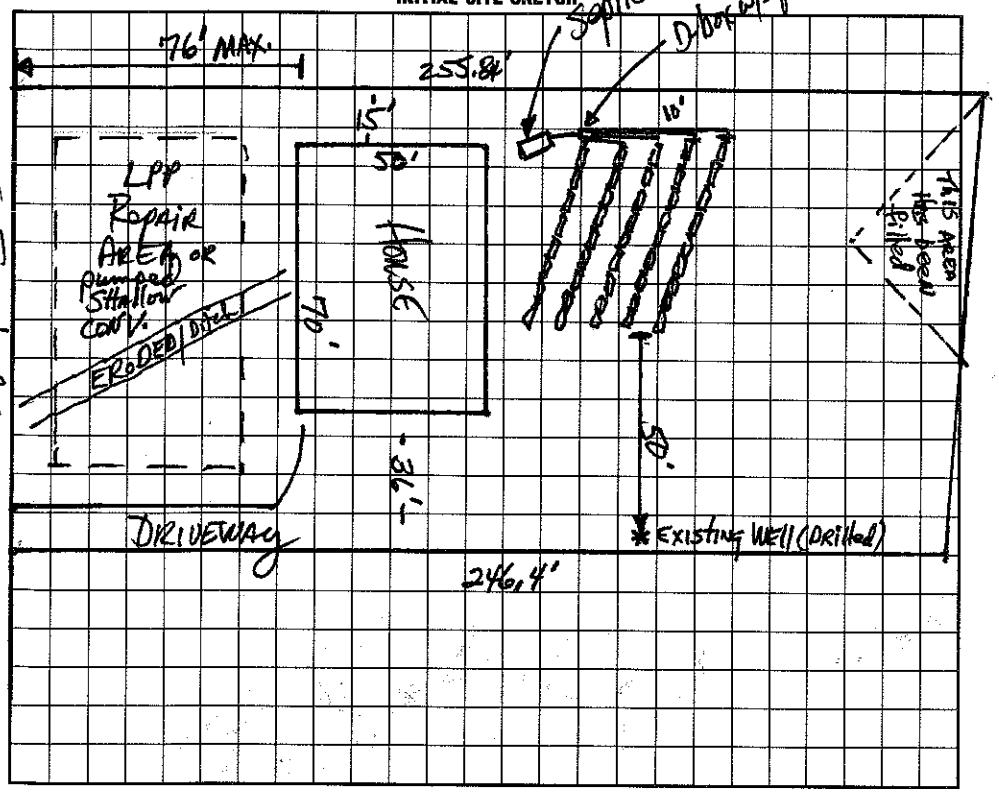
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual EX. ☐ Community ☐ Public

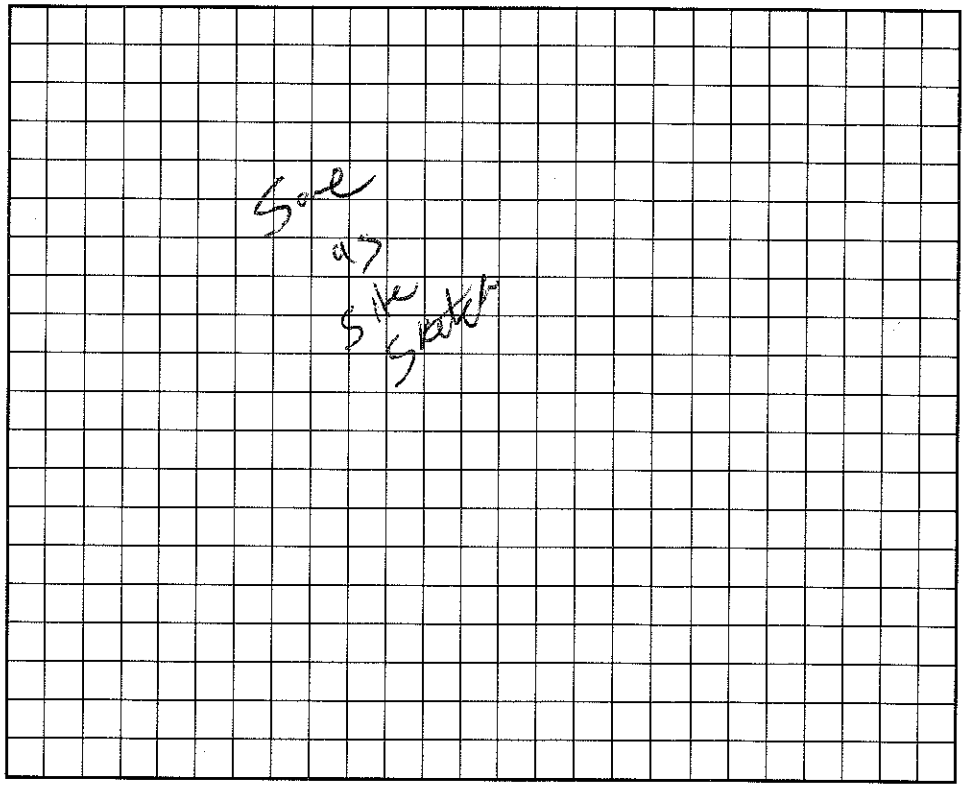
Comments:
1"=50'

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

Improvement Permit by: date 9-3-97

~~Existing System Inspected by:~~ Authorization date 9-3-97

Installed by: A1 BACKHOE

Certificate of Completion by: date

Operation Permit by: date 10/21/97

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