4698 21 1902

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: 16532 DATE 6/22/93 TAX MAP NO. Pt of 2P - B - 21

OWNER OR CONTRACTOR GERALD NANCE PHONE: Business Home 664-4131

ADDRESS Rt 4 Box 429

LOCATION McDANNIS RD, NEXT TO LAST TRAILER ON (L)

SUBDIVISION BLOCK / SECTION LOT LOT AREA ~1AC SITE CLASS. P L.T.A.R. .3

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3 Trench Width 3 Trench Depth 36" Gravel Depth 12"

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

System Description: CONV

Repair System Description: CONV

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3 Garbage Disposal: ☐ Yes ☑ No

☐ Mobile Home No. Bathrooms 2 Auto. Dishwasher: ☑ Yes ☐ No

☐ Business No. Employees Auto. Washing Machine: ☑ Yes ☐ No

☐ Other Other

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

Comments Lines A & B are doing all the work - D/B need speed levelers and reflectors to the S/T Keep house a minimum of 15' from basement wall

INITIAL SITE SKETCH

The proposed / existing Accessory Building addition does not appear to impact the existing septic system.

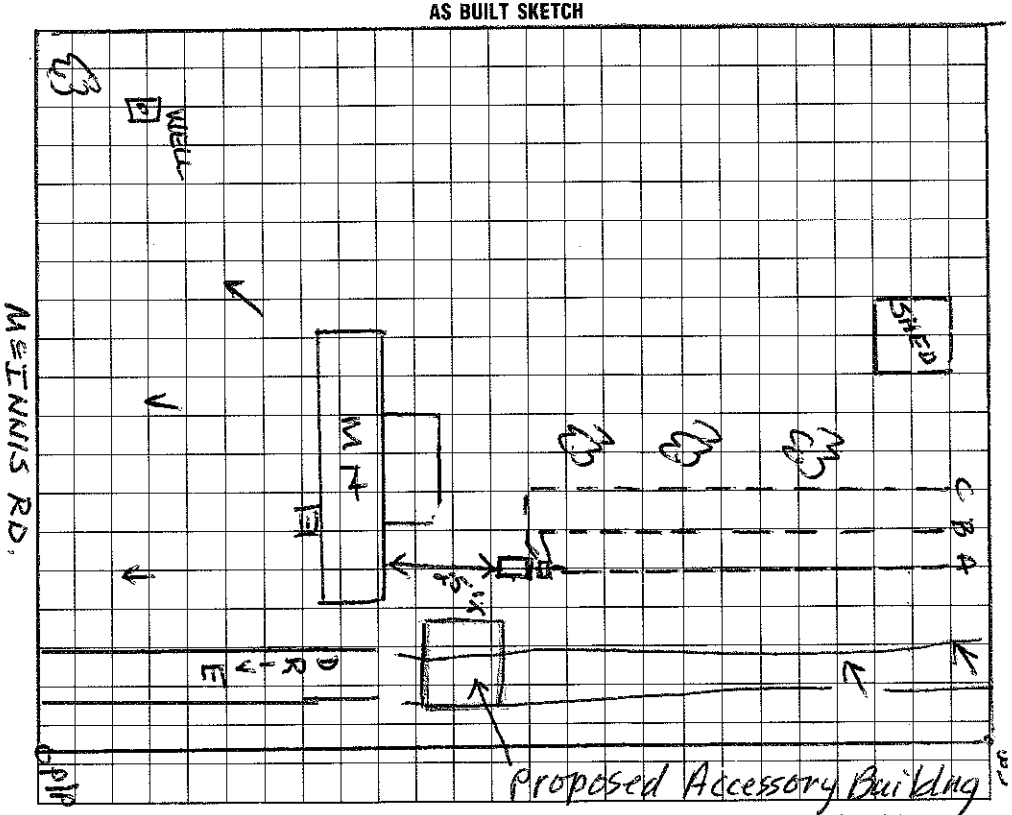
**NOTE: Keep Building min. 5' from septic

Judy Melvill R.S.

Date: 5-1-13

ICHD-Environmental Health Division

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:

Installed by: F.T. Ervin 12/31/91

Improvement Permit by: date

Certificate of Completion by: DRH date

Existing System Inspection by: Wesley Sparks R.S. date 6/22/93

Operation Permit by: date

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