IREDELL COUNTY HEALTH DEPARTMENT

4649298017

STATESVILLE 704-878-5305

9.30

MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 16453 DATE 6/25/93 TAX MAP NO. 3F A22 4649886519

OWNER OR CONTRACTOR MICHAEL MOORE PHONE: Business Home 528-5258

ADDRESS R+1 BOX 203 TROUTMAN, NC. 28166

LOCATION CARLYLE RD.

SUBDIVISION N/A BLOCK / SECTION LOT LOT AREA ~ 40AC SITE CLASS. P L.T.A.R. .35-.4

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 1007 Date 5/6/97

Pump Tank: Gallons; PT Date

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

No Lines 3 Trench Width 36" 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 ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

Garbage Disposal: ☐ Yes ☑ No

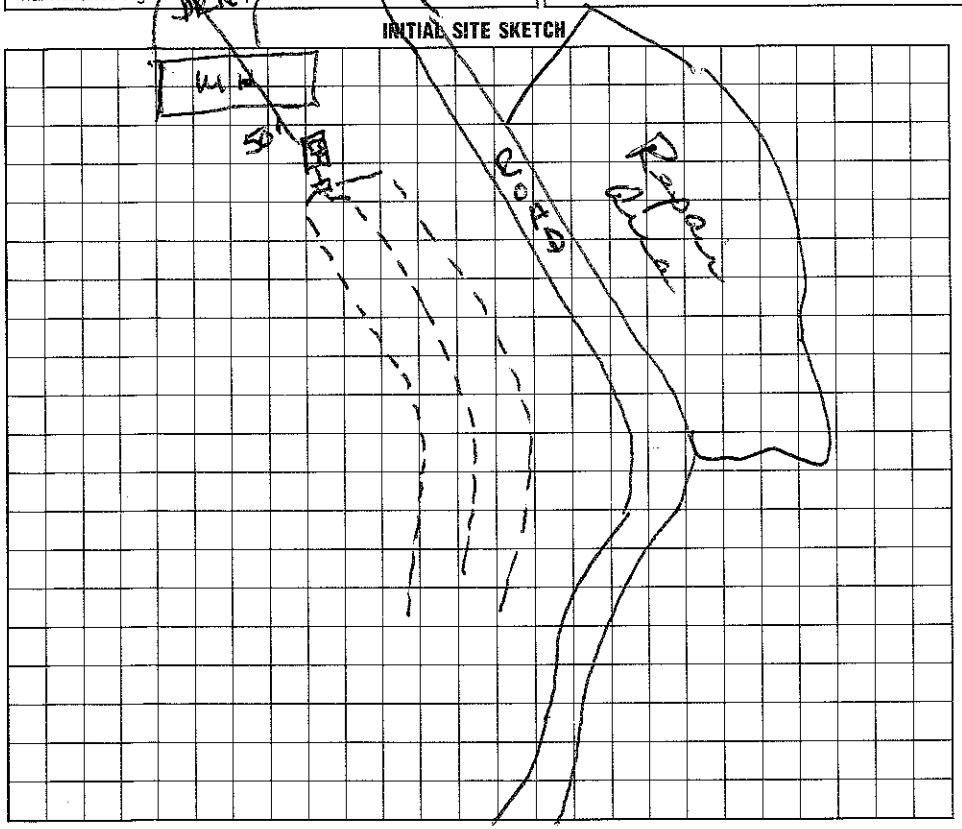
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

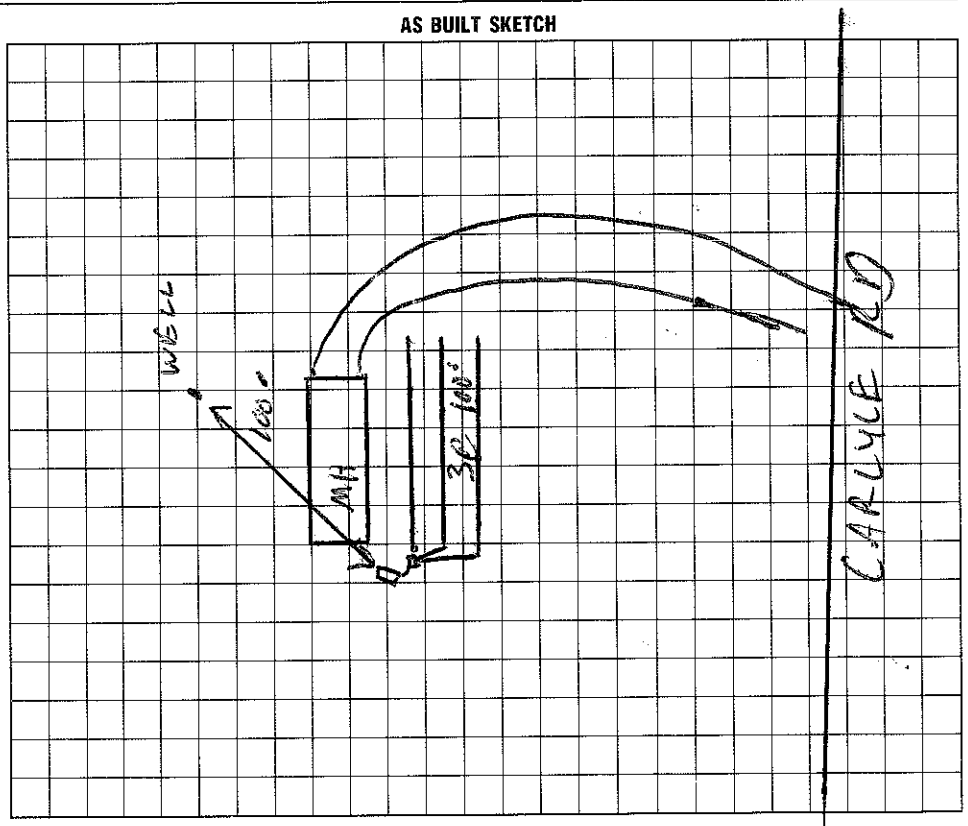
Other

Comments WELL TO BE 50' MINIMUM FROM ANY PART OF SEPTIC TANK SYSTEM. TRENCHES NO DEEPER THAN 30" TO TRENCH BOTTOM

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 Michael Moore

Improvement Permit by: Wesley Sparks RS date 6/25/93

Existing System Inspection by: date

Installed by: WAYNE CLONTZ

Certificate of Completion by: date

Operation Permit by: date 9/12/97

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