10:30

IREDELL COUNTY HEALTH DEPARTMENT

AUTH. TO CONSTRUCT

4649384397

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 23776 DATE 8/27/96 TAX MAP NO. 3F-A-104

OWNER OR CONTRACTOR SCOTTY MOORE PHONE: Business Home 528-5258 Watershed: ☑ Yes ☐ No

ADDRESS 379 FERN HILL RD. TROUTMAN 28166

LOCATION PERTH RD. S - TL CARLYLE RD ON LEFT

SUBDIVISION ~ BLOCK / SECTION ~ LOT ~ LOT AREA SITE CLASS. PS

Septic Tank: 1000 Gallons; STB 825 Date 9/1/96

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth ≈24" Gravel Depth 12"

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

System Description: GRAVITY CONV.

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

DESIGN FLOW 360GPD L.T.A.R. .3 GPD/FT

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

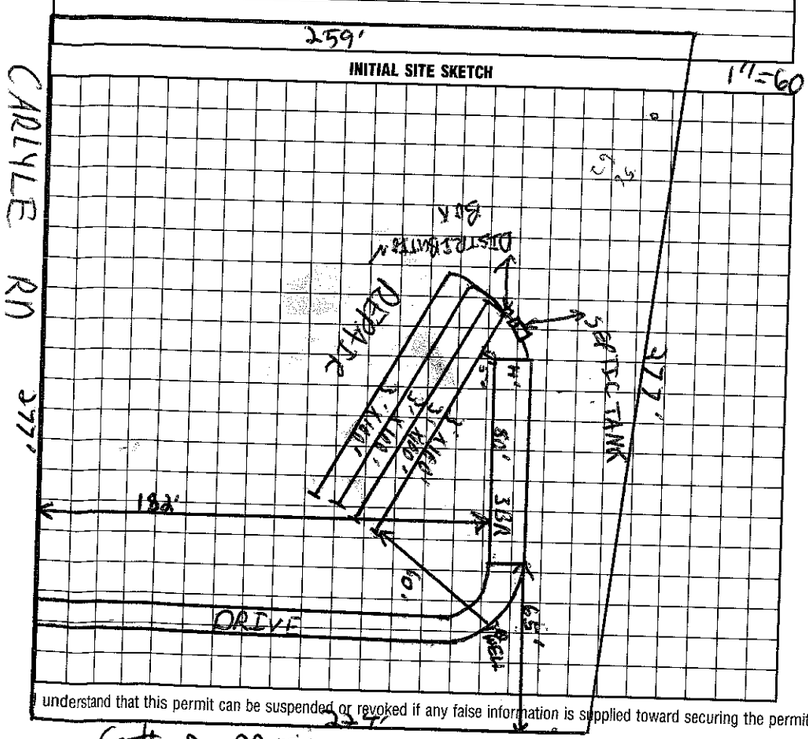
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

Comments: UPPER 3 LINES CHECKED - 11/6/96 CBF

INITIAL SITE SKETCH



AS BUILT SKETCH

SAME AS INITIAL SITE 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.

Signed: Scotty D. Moore

Improvement Permit by: C. Ruby Thomas EHS date 8/27/96

Existing System Inspection by: C. Ruby Thomas EHS date 8/27/96

Installed by: CLONTZ

Certificate of Completion by: date

Operation Permit by: C. Ruby Thomas date 11/7/96

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