IREDELL COUNTY HEALTH DEPARTMENT

PIN#4654-79-3966

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

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

PROPERTY DESCRIPTION NO. 16744 DATE August 6, '93 TAX MAP NO. IC-9A 20B/20C

OWNER OR CONTRACTOR Raymond L. Moore PHONE: Business _____ Home _____

ADDRESS _____

LOCATION 1.15 S. TL 1137 TR Beracah Place on left

SUBDIVISION Beracah Place BLOCK / SECTION _____ LOT 20B/20C LOT AREA 2 AC SITE CLASS. #5 L.T.A.R. .3

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 358 Date 11/11/93

Pump Tank: _____ Gallons; PT _____ Date _____

Nitrification Field: No Fields 4 Square Feet 1200 Linear Feet 400

No. Lines 4 Trench Width 36" Trench Depth 30-36" 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 No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees _____

☐ Other _____

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

Garbage Disposal: ☐ Yes ☑ No

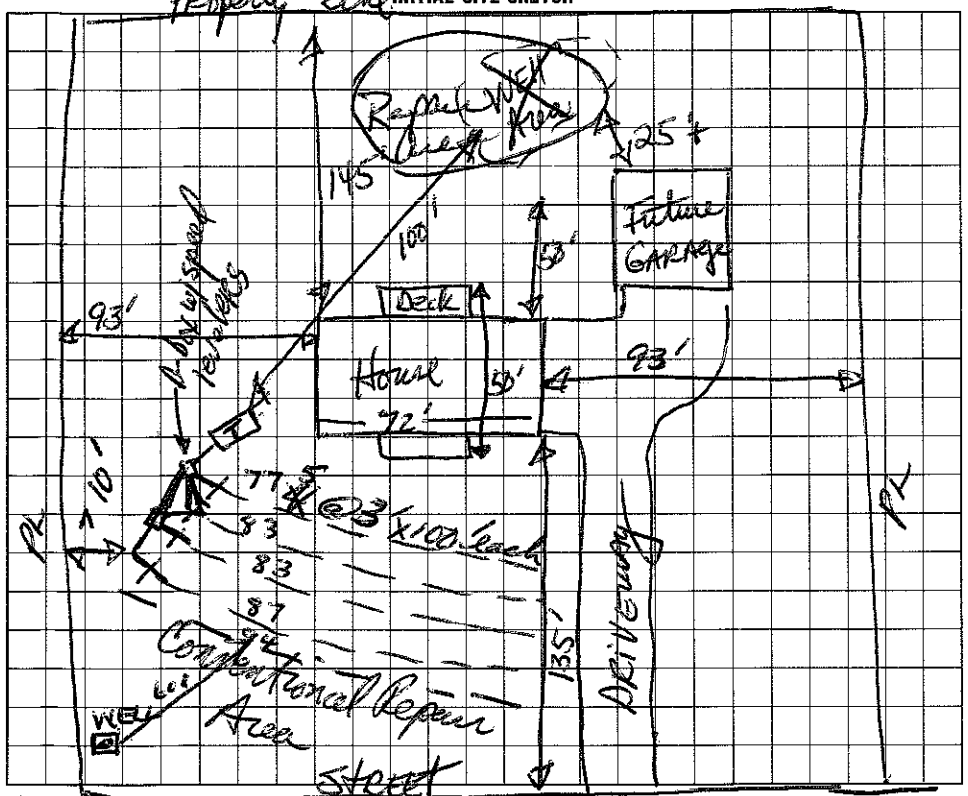
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

Other _____

Comments Follow contour w/drainfield

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 Raymond L Moore

Improvement Permit by: [signature] RS date 8/6/93

Existing System Inspection by: _____ date _____

Installed by: Dennis Belshaw

Certificate of Completion by: Wesley Sparks RS. date 2/9/94

Operation Permit by: _____ date _____

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