4695957756

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. 15889 DATE 3/28/94 TAX MAP NO. 1C - A - 21 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Jess Curtis Poteat PHONE: Business 892-3581 Home

ADDRESS PO Box 400 Davidson, NC. 28036

LOCATION Sink Farm Rd. (R) off Presby. Rd, Thru gate to "Castle on (L) -

SUBDIVISION N/A BLOCK / SECTION LOT LOT AREA ~ 8! SITE CLASS. P. DESIGN FLOW 240 L.T.A.R. .2.

Septic Tank: 1000 Gallons; STB 358 Date 10/19/93

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 3' Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: DROP BOX - CONV.

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☑ Other 2 BED APT OVER GARAGE

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

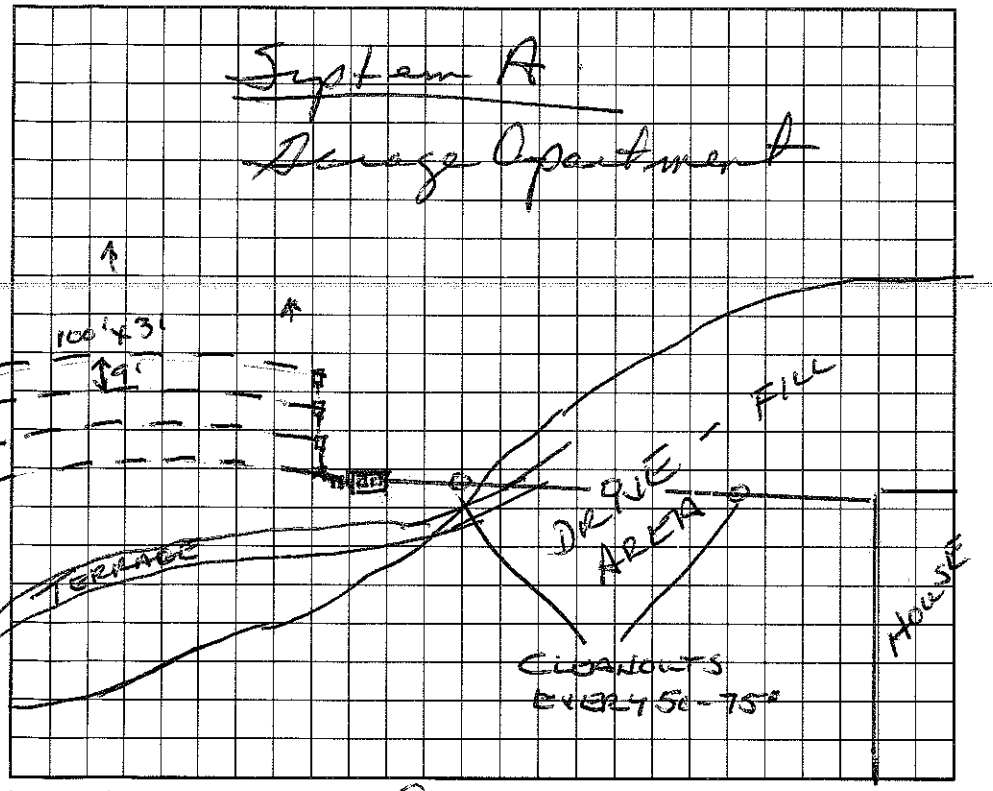
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: System not less than 150' from Left end of garage. Install below old Division Terrace - Keep Terrace in tact - Trench bottom 30"

Comments:

Installed as drawn.

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: Wayne Allison

Improvement Permit by: Wesley Sparks RS. date 3/28/94

Existing System Inspection by: date

Installed by: Davison Const Co.

Certificate of Completion by: Wesley Sparks RS. date 3/30/94

Operation Permit by: date

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

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. 15889 DATE 3/28/94 TAX MAP NO. 1C-A-21 Watershed: ~~Yes~~ ☐ No

OWNER OR CONTRACTOR Joe Curtis Potter PHONE: Business 892-3581 Home

ADDRESS PO Box 400 Davidson, NC 28036

LOCATION Sile Farm Rd, (R) off Presby. Rd., Three gate main system for house

SUBDIVISION No BLOCK / SECTION LOT LOT AREA ~81 AC SITE CLASS. P DESIGN FLOW 600 L.T.A.R. .3

Septic Tank: 2000 Gallons; STB 80 Date 11/25/94

~~Pump~~ Tank: 1000 Gallons; PT 358 Date 11/19/94

Pump Make: Model Serial No.

Nitrification Field: No Fields 2 Square Feet 1035+1035 Linear Feet 345/345

No Lines 3+3 (6 TOTAL) Trench Width 3' Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: FLOW DIVIDERS - CONV.

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 5

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

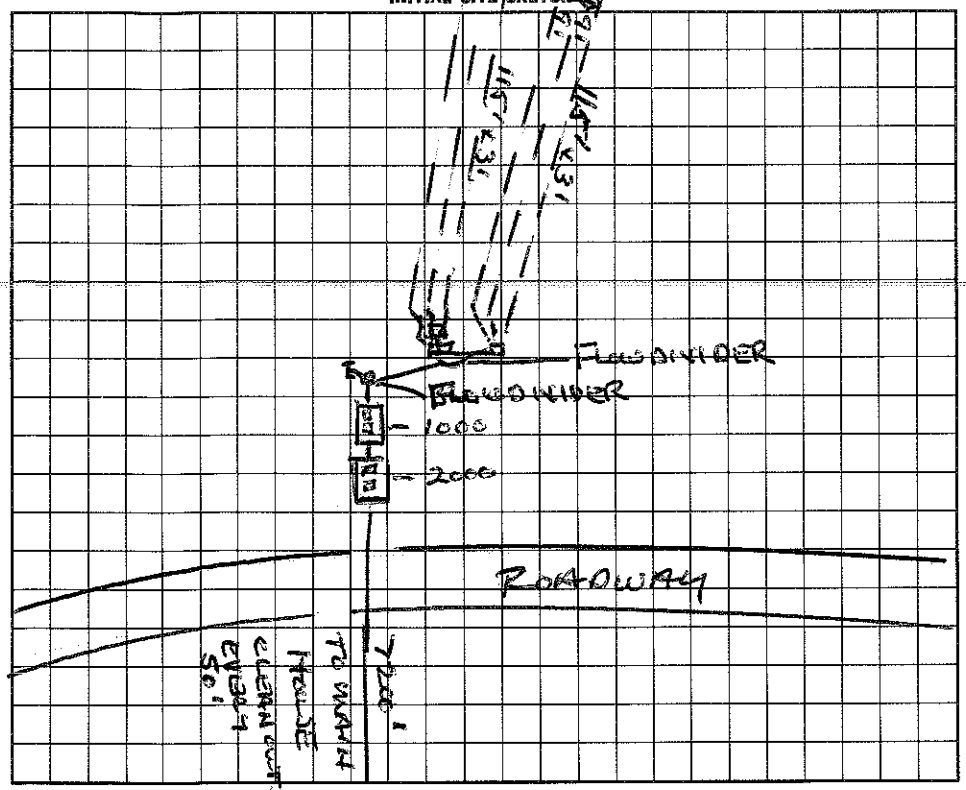
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☐ Public

Comments:

Comments: installed as drawn.

INITIAL SITE SKETCH



AS BUILT SKETCH

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Signed:

Improvement Permit by: Wesley Sparks RS date 3/28/94

Existing System Inspection by: date

Installed by: Osborne Const Co.

Certificate of Completion by: Wesley Sparks RS date 3/30/94

Operation Permit by: date

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