IREDELL COUNTY HEALTH DEPARTMENT

Authorization to Construct

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

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

PROPERTY DESCRIPTION NO. 23774 DATE 5/9/96 TAX MAP NO. 4655617969 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Lloyd Knox PHONE: Business 872-0692 Home

ADDRESS Midway Lake Rd Box 106 - Mooresville NC 28115

LOCATION Hwy 115 S - TL Faith Rd - TR Midway Lk Rd - TL Gravel Drive off of Midway Lake

SUBDIVISION BLOCK / SECTION LOT LOT AREA 7.2ac SITE CLASS PS DESIGN FLOW 100gpd L.T.A.R. 1.3 gpd/ft²

Septic Tank: 1000 Gallons; STB 794 Date 5/14/96

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 360 Linear Feet 120

No Lines 2 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity Conventional

Repair System Description: Panel

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms No. Bathrooms No. Employees 5

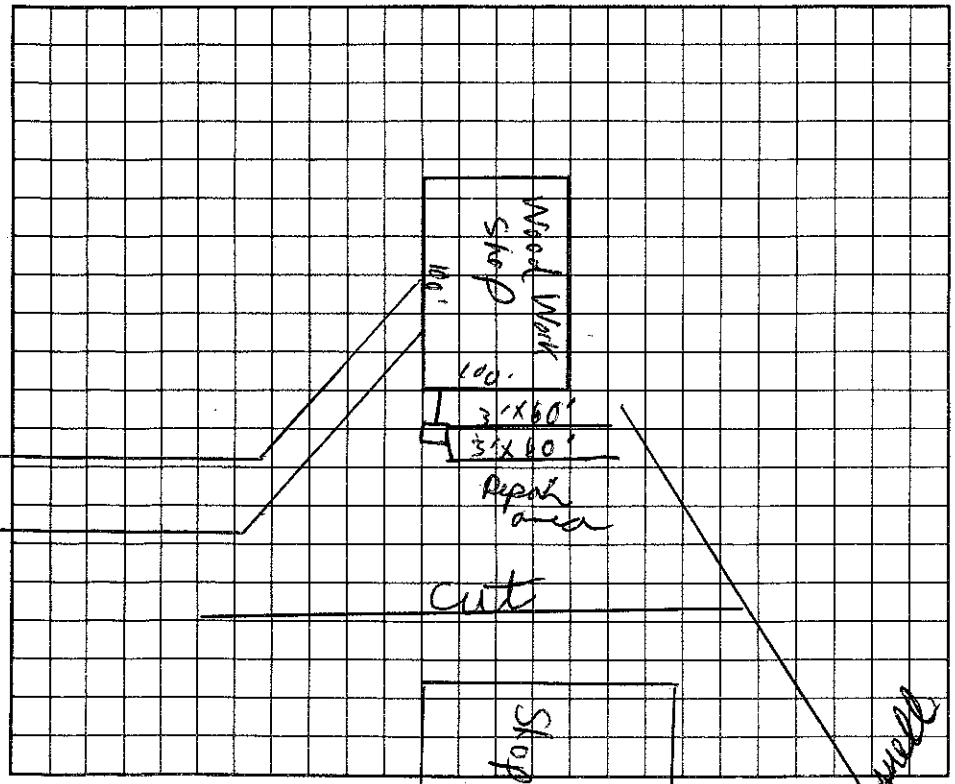
☑ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

Comments:

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.

Signed: P.R. Building Sup. Rep.

Installed by: F J Ervin

Improvement Permit by: C. Brent Keen EHSI date 5/9/96

Authorization to Construct ~~Existing System Inspection~~ by: C. Brent Keen EHSI date 5/9/96

Certificate of Completion by: date

Operation Permit by: Wesley Parks R.S. date 6/28/96

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

Authorization to Construct is valid for 60 months from issue date.