# 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. REPAIR DATE 7/19/94 TAX MAP NO. 4656224484 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR IRELAND, LEE

ADDRESS Rt 11 Box 302 Mooresville NC. PHONE: Business Home 664-2672

LOCATION 115 S on (R) 2nd house beyond Plaza

SUBDIVISION NO BLOCK / SECTION LOT LOT AREA SITE CLASS. DESIGN FLOW L.T.A.R.

Septic Tank: 1000 EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

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

System Description: CONV. - DISTBOX

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

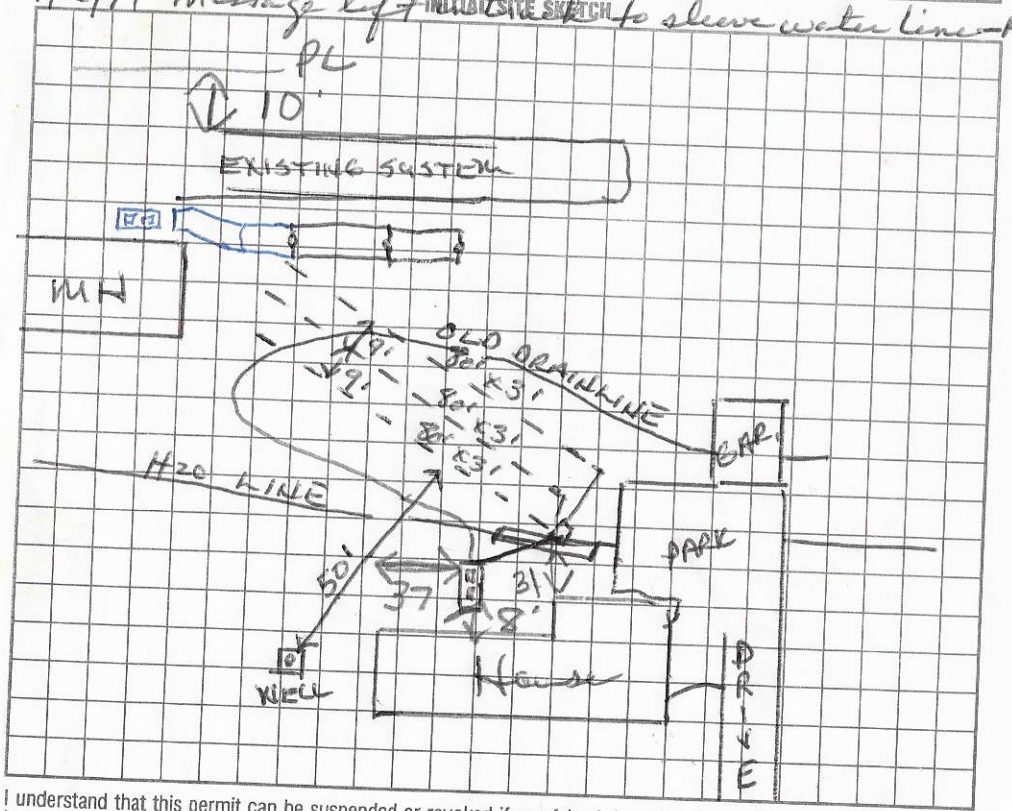
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Community
☐ Public

Comments: SLEEVE WATERLINE IN SOLID PVC TO 10' BEYOND SEWAGE LINE IN BOTH DIRECTIONS. REPAIR WILL DISSECT OLD DRAINLINE IN SEVERAL PLACES - THERES NO OTHER ROUTE SHORT OF PUMPING TO FRONT YARD.
9/6/94 Message left to sleeve water line - AWS.

Comments:
9/6/94 Installed as shown on plan. Permit Plumbers to reroute H2O line above trenches and 12" vertical over SCH40 PVC between SIT and D/B

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:

Improvement Permit by: Wesley Sparks RS. date 7/19/94

Existing System Inspection by: date

Installed by: Tim Simmons

Certificate of Completion by: Wesley Sparks RS. date 9/7/94

Operation Permit by: date

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