4656957290 3:30

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 4/30/97 TAX MAP NO. REPAIR Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR BRENDA McNEELY PHONE: Business Home

ADDRESS CLODFELTER DR. MOORESVILLE NC 28115

LOCATION SHEARERS RD - TR CLODFELTER - ON RT

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA SITE CLASS. PS DESIGN FLOW 360GPD L.T.A.R. —

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 60

No Lines BED Trench Width 12' Max Trench Bottom Depth AS NEEDED Gravel Depth 24"

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

System Description: GRAVITY CONV. BULL RUN VALVE

Repair System Description: Plastic Chamb.

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

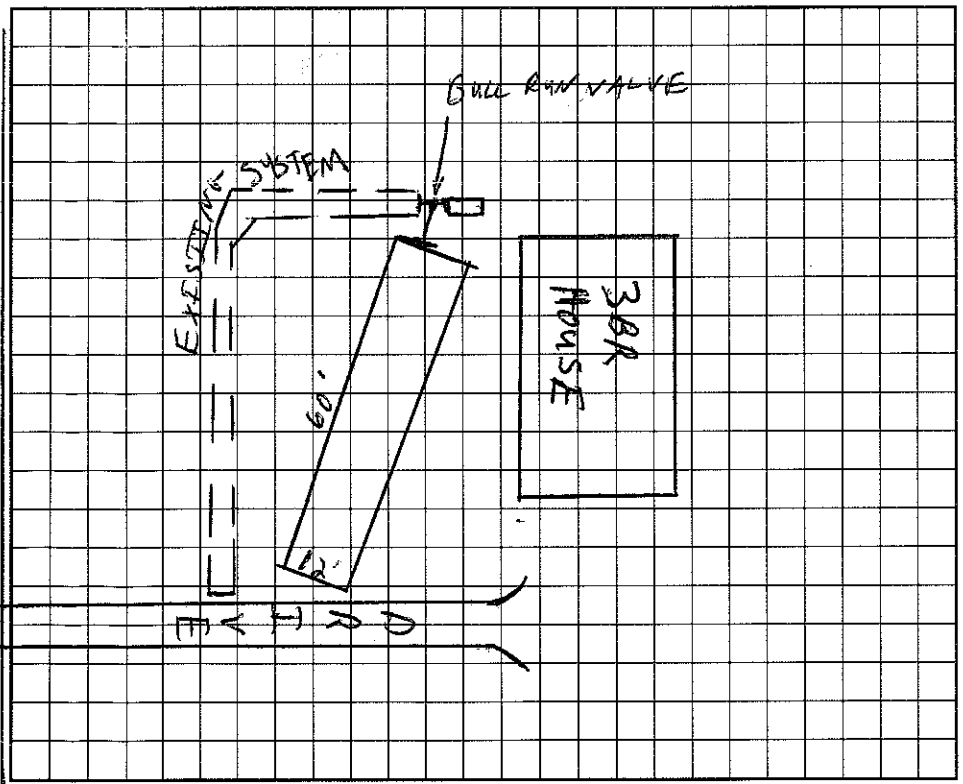
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Community
☒ Public

Comments:

Comments: Installed as drawn; Plastic chamber bed instead of conv.

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: Mike McNeely

Improvement Permit by: C Ray Zoellner date 4/30/97

Existing System Inspection by: C Ray Zoellner date 4/30/97

Installed by: Larry Beam

Certificate of Completion by: Myra Dotson date 7/25/97

Operation Permit by: Myra Dotson date 7/25/97

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