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. 2836 DATE JULY 1, 1994 TAX MAP NO. 4 A 13 C | 4657-48-1280 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR KEITH CARROLL PHONE: Business 664-1155 Home

ADDRESS 795 FRENCH BELK RD. MT ULLA NC 28125

LOCATION N on hwy 21 from hwy 150, ¼ mile on right (eastside) to private road, Brantley Acres Road, on right side at fork

SUBDIVISION Brantley Acres BLOCK / SECTION LOT 2 LOT AREA 20,000 MIN SITE CLASS. P DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 794 Bellaire Date 12-1-94

Pump Tank: na. Gallons; PT Date

Pump Make: na. Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: gravity conftional

Repair System Description: pump conftional

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

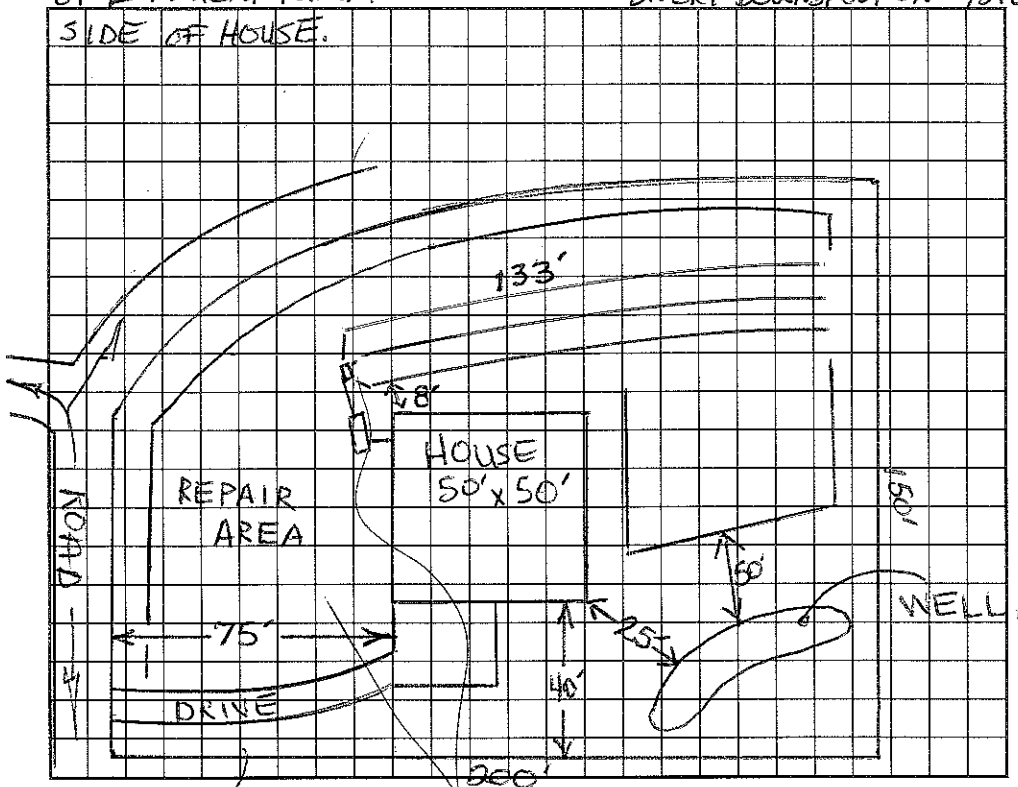
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

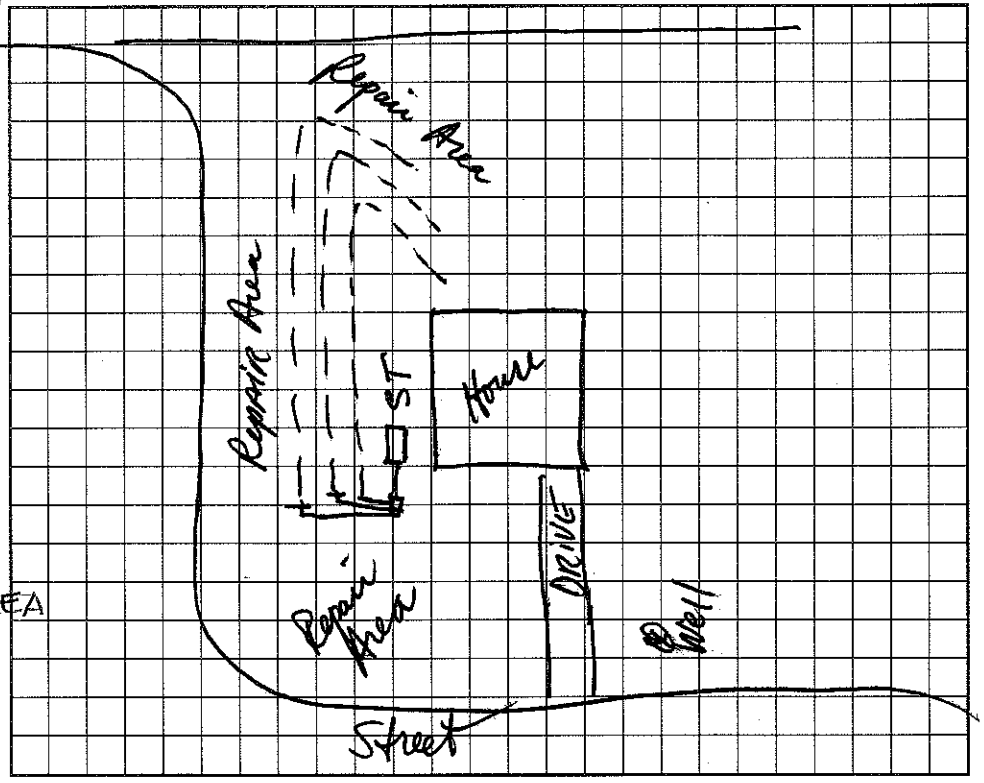
Comments: DO NOT INSTALL DURING WET SOIL CONDITIONS. CONTACT DEPT PRIOR TO EXCAVATION TO CONFIRM LAYOUT. STUBOUT + TANK AT GROUND SURFACE. HOUSE MAY BE MOVED FURTHER DOWNSLOPE THIS WOULD NECESSITATE INSTALLATION OF EFFLUENT PUMP.

Comments: Well not installed where shown, contours change such that alignment of laterals where changed to avoid stepdowns.

INITIAL SITE SKETCH DIVERT DOWNSPOUT ON SYSTEM SIDE OF HOUSE.



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: Keith Carroll

Improvement Permit by: Andrea Lemon date 7-1-94

Existing System Inspection by: date

Installed by: J J Evans

Certificate of Completion by: D Robinson RS date 2-2-95

Operation Permit by: date

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