(3:30)

IREDELL COUNTY HEALTH DEPARTMENT Const Auth STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PROPERTY DESCRIPTION NO. 24610 DATE April 17, 97 TAX MAP NO. part of 1LA5 4658 01 6861 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Krom Financial Services PHONE: Business _____ Home _____

ADDRESS 149 Yacht Cove RD, Mooresville

LOCATION 21N to TR Valleyview TR Cliffview on right near end

SUBDIVISION Oakbrook BLOCK / SECTION _____ LOT 31 LOT AREA .76 Ac SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 825 Date 12/11/97

Pump Tank: 1000 Gallons; PT 47 Date 12/16/97

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: pumped - pm - conventional

Repair System Description: same

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

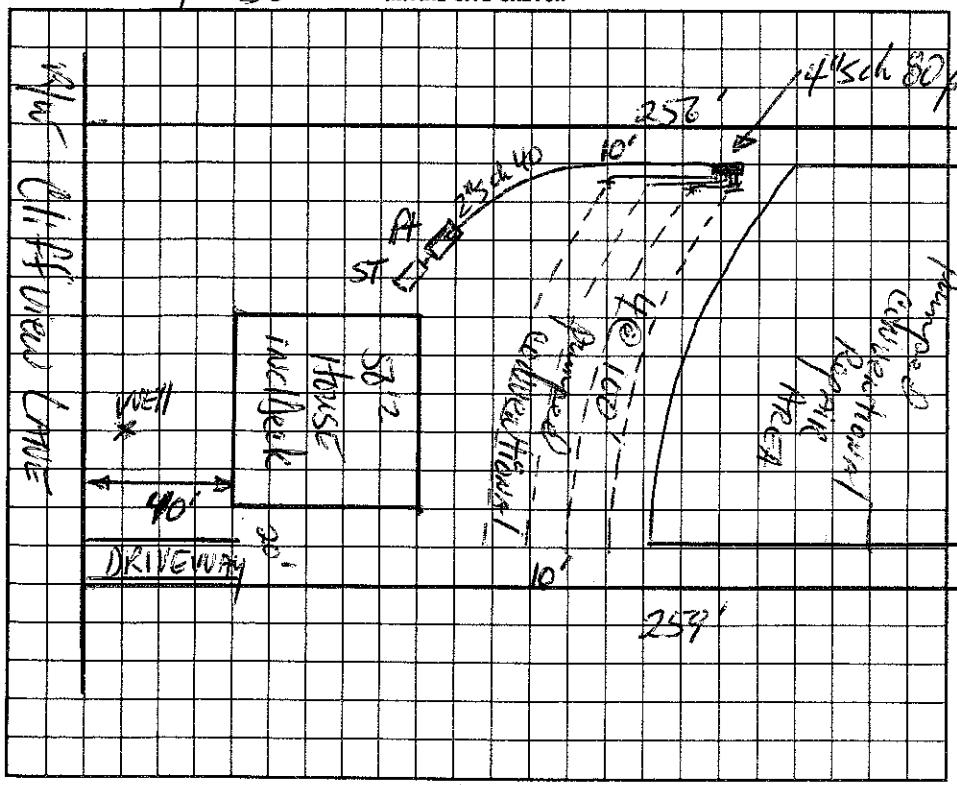
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

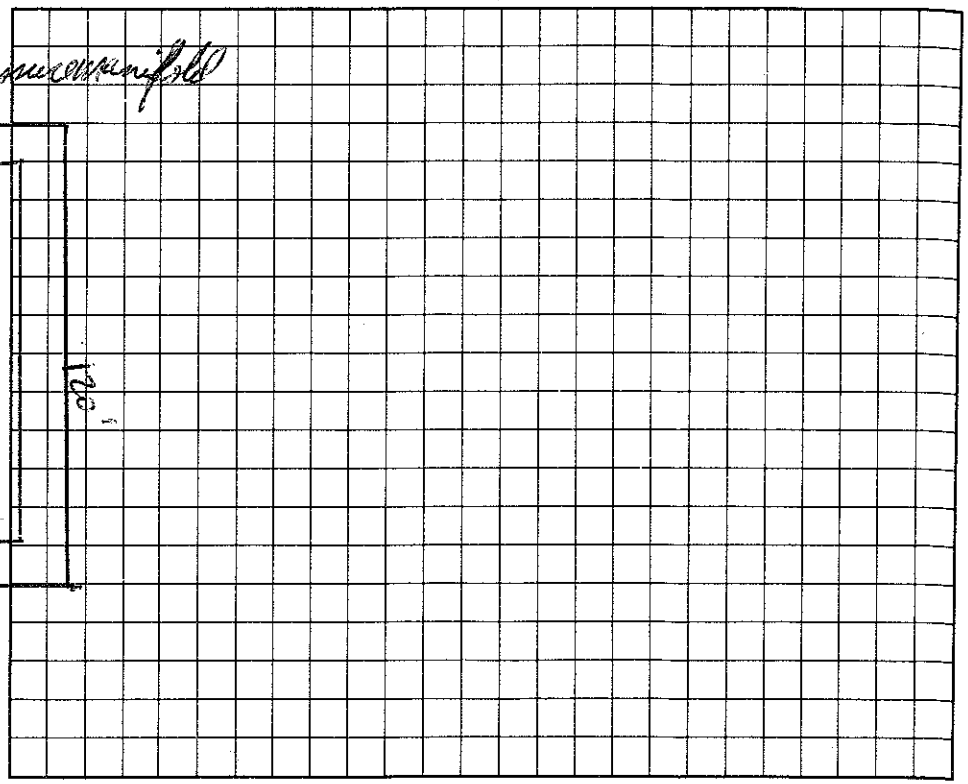
Comments:

1" = 50'

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: _____

Improvement Permit by: _____ date 4/17/97

~~Existing System Inspection by:~~ Construction Authorization _____ date 4/17/97

Installed by: ROWAN SEPTIC

Certificate of Completion by: _____ date _____

Operation Permit by: _____ date 2/25/98

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