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. 18775 DATE 7/22/94

OWNER OR CONTRACTOR Diane Fesperman TAX MAP NO. IM-11-A-4

ADDRESS PO Box 651 Mooresville, NC PHONE: Business Watershed: ☐ Yes ☑ No

LOCATION Sinclair Rd. 115N, to 5th house on (R) drive on (L) of house to rear of field in woods Home 664-5819

SUBDIVISION N/A BLOCK / SECTION LOT LOT AREA ~1AC SITE CLASS. P DESIGN FLOW 360 L.T.A.R. .25-.3

Septic Tank: 1000 Gallons; STB 794 Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4@5 Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: DROP BOX - CONV.

Repair System Description:

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

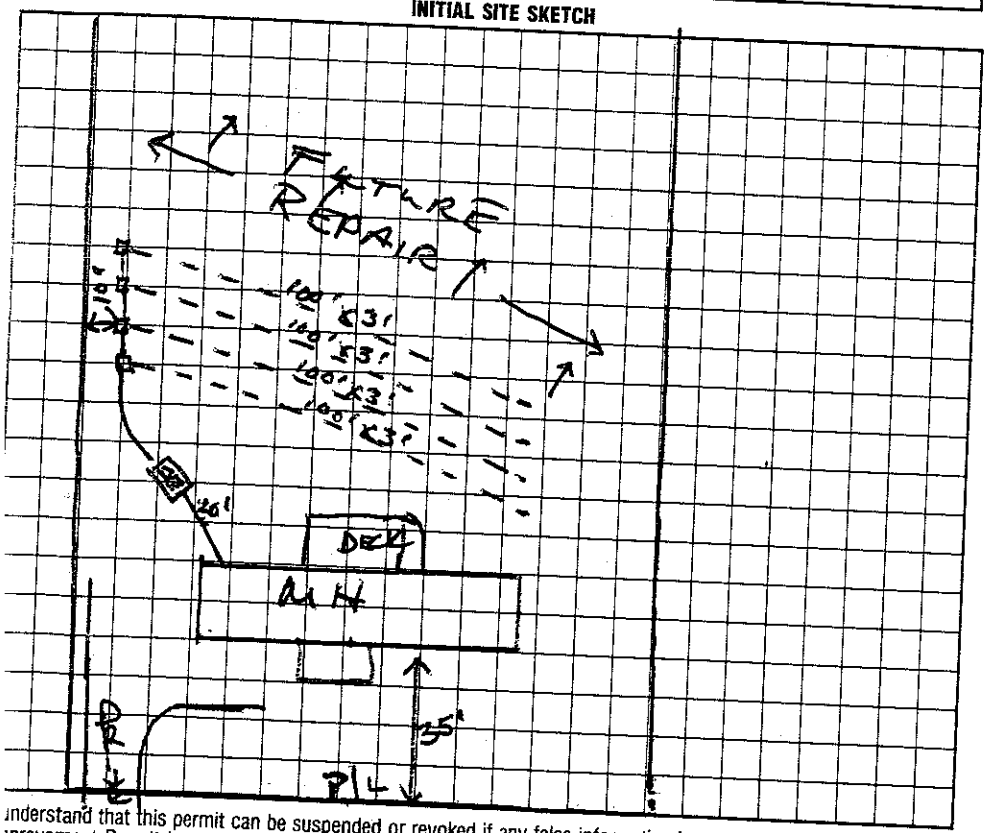
Water Supply: ☑ Individual ☐ Community ☐ Public

FRONT

Comments: Lines on slope contours.

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as drawn.

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: Owner + Allen Crouse

Improvement Permit by: Wesley Sparks RS. date 7/22/94

Existing System Inspection by: date

Installed by: Allen Crouse

Certificate of Completion by: Wesley Sparks RS. date 8/8/94

Operation Permit by: date

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