4659-44-1869

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. 16499 DATE 6/14/93 TAX MAP NO. 4E-4A7

OWNER OR CONTRACTOR Patricia Parris PHONE: Business Home 663-4235

ADDRESS Freeze Rd. Mooresville, NC.

LOCATION 115N, TR 1 onto Freeze Rd. to 7th lot on (L) from 115

SUBDIVISION Freeze Crossing BLOCK / SECTION 1 LOT 7 LOT AREA ~20,000 FT² SITE CLASS. P L.T.A.R. .25-.3

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 825 Date 4/25/93

Pump Tank: N/A Gallons; PT Date

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

No Lines 3 Trench Width 3 Trench Depth 36" Gravel Depth 12"

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

System Description: CONVENTIONAL

Repair System Description: PRES-CONV.

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

Garbage Disposal: ☐ Yes ☑ No

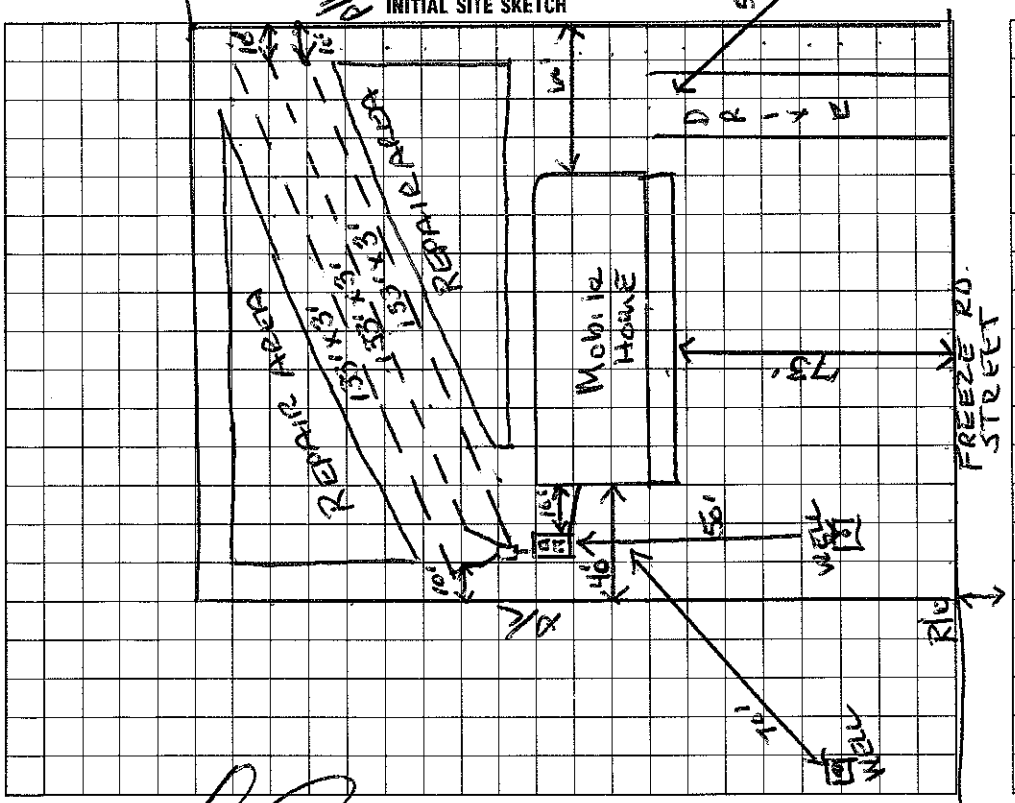
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

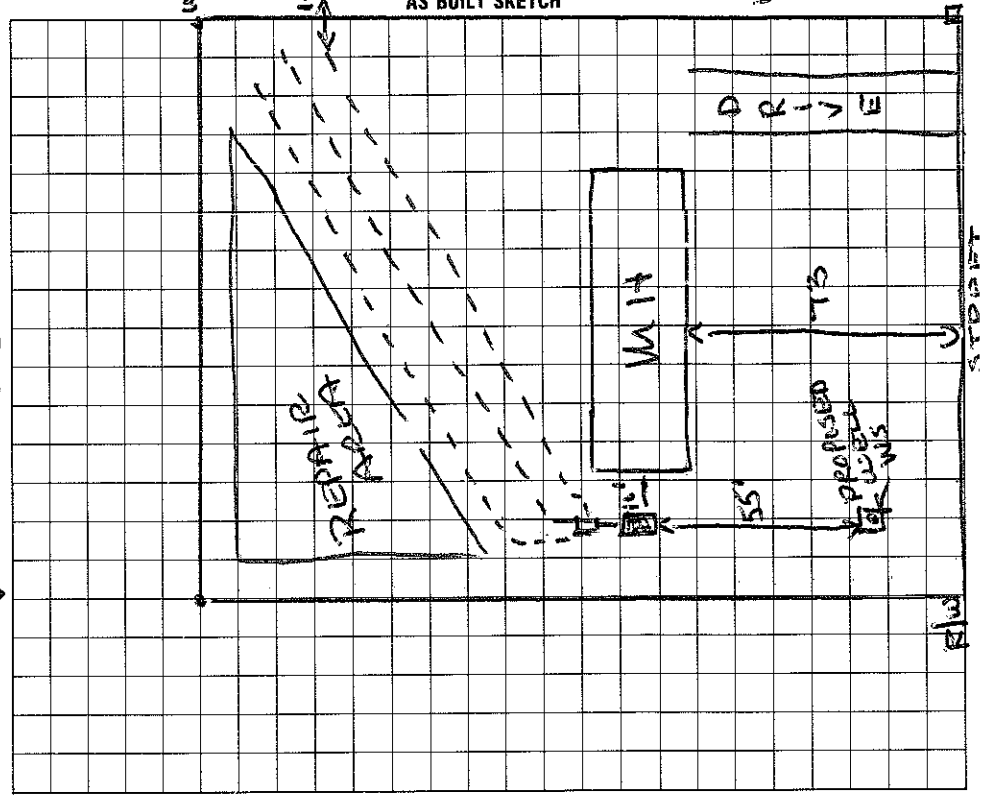
Other

Comments Trench depth ~ 36" to bottom

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 6/14/93

Existing System Inspection by: date

Installed by: Wayne Potts

Certificate of Completion by: Wesley Sparks RS. date 6/21/93

Operation Permit by: date

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