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. 17499 DATE 1/3/94 TAX MAP NO. 4E 4A 24 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR EUGENE KEENE PHONE: ~~Business~~ BN# 4659-44-5883 Home

ADDRESS 168 PARK DR. BRIGHTON N.J.

LOCATION FREEZE RD. 1.15N TR ON FREEZE RD TO LOT 24 ON (R)

SUBDIVISION FREEZE CROSSING BLOCK / SECTION LOT 24 LOT AREA ~.69 AC SITE CLASS. P DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 782 Date 11/11/93

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1320 Linear Feet 440

No Lines 4 Trench Width 3' Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: CONV - DIST. BOX

Repair System Description: CONV.

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

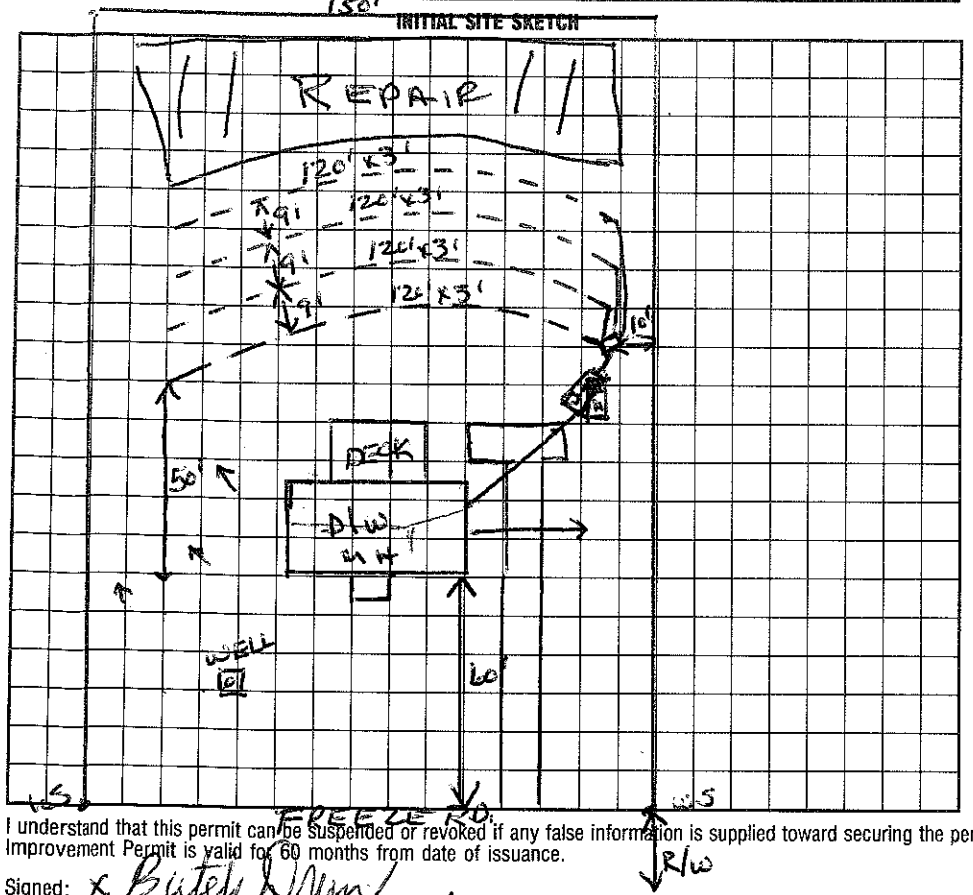
Comments:

TRENCH DEPTH NO DEEPER THAN 36"

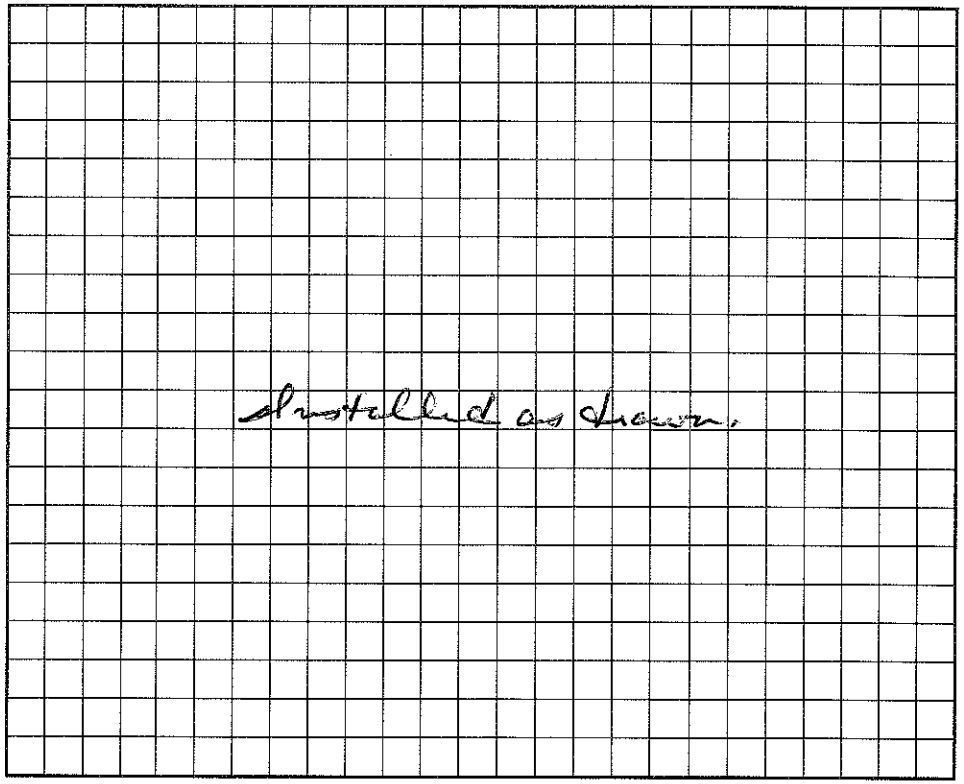
Comments:

Stepdowns 2 per trench

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: X Buford Wilson

Improvement Permit by: Wesley Sparks R.S. date 1/3/94

Existing System Inspection by: date

Installed by: Dennis Gallehugh

Certificate of Completion by: Wesley Sparks R.S. date 2/21/94

Operation Permit by: date

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