4.00

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. 06 7425 DATE Aug 20, '97 TAX MAP NO. 4665 32 8745 1865 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR James McKnight PHONE: Business _____ Home _____

ADDRESS 255 Rolling Hills RD. O Mooresville

LOCATION Sharon Rd. S. TR Ashley Dr. bear right stand on left

SUBDIVISION Ashley Woods BLOCK / SECTION _____ LOT 13 LOT AREA .49 SITE CLASS. RS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB PP 1012 Date 7-1-97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 3@100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: chambered or HDS

Repair System Description: gravel pumped chm / HDS

Maintenance Agreement Required ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home DW No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

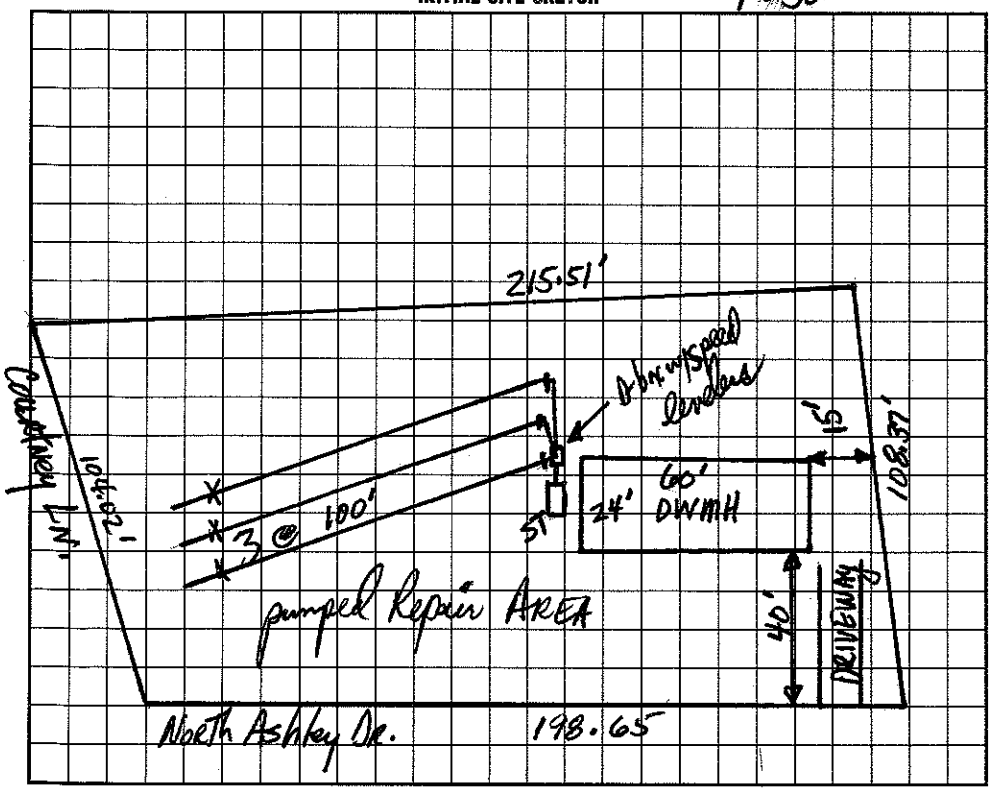
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

Comments: ONE inspection port per LATERAL

Comments: Installed in 4 trenches ~75' each

INITIAL SITE SKETCH 1"=50'



AS BUILT SKETCH

Installed substantially as shown

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: Russell Wilson

Improvement Permit by: _____ date 8-20-97

~~Construction~~ ~~Existing System~~ Inspection by: _____ date 8-20-97

Installed by: A-1 Backhoe / Dennis Gallehen

Certificate of Completion by: _____ date _____

Operation Permit by: _____ date 9-3-97

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