IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

Repair - (3:30)

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

PROPERTY DESCRIPTION NO. Repair DATE 1/29/98 TAX MAP NO. Repair PIN: 4665348735 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR Textile Design Machine Co. PHONE: Business 664-1374 Home

ADDRESS 1320 Shearers Rd Mooresville

LOCATION Shearers Rd. past Franklin Grove to Rocky River - Across from Intersection of Rocky River & Shearers

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS. DESIGN FLOW ~11 empl. T.A.R.

Septic Tank: 1500 Gallons; STB 3 Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 2 Square Feet 900' Linear Feet 300'

No Lines 3 - 6 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: Grav. Conventional

Repair System Description: Grav. Conventional w/ Ball Rel. Valve

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms

☐ Mobile Home No. Bathrooms

☒ Business No. Employees 11

☐ Other

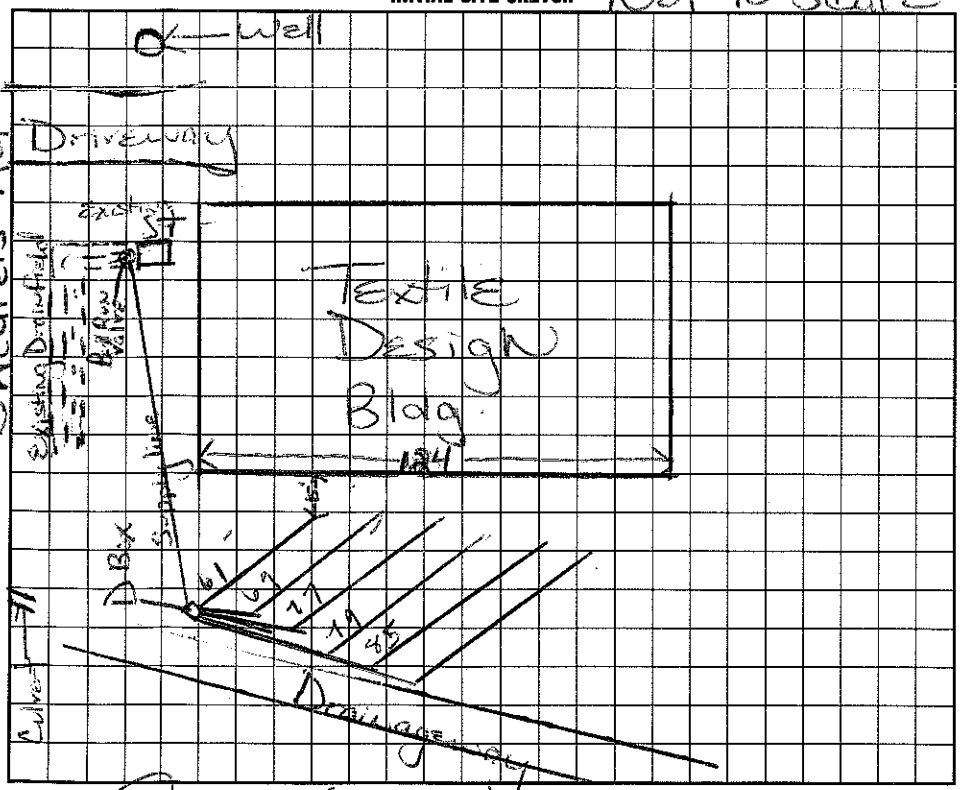
☒ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

Comments: Install lines on Contour or such that fall in Drainlines does not exceed 1/4 inch per 10 ft. Installer may call Health Dept

Comments: Surface water & runoff of surface water (including gutter drains) shall be diverted away from Drainfield.

INITIAL SITE SKETCH Not to Scale



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: Marina H. Dotson date 1/29/98

Existing System Inspection by: Marina H. Dotson date 1/29/98

Installed by: Julian Bowles

Certificate of Completion by: date

Operation Permit by: C. Ray Thomas RS date 2/13/98

Repair

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