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. 20864 DATE 4/28/95 TAX MAP NO. 1E 41450 4665529865 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR Joe Collins PHONE: Business 847-4297 Home

ADDRESS 1370 Idlewild Rd. Matthews, NC. 28105

LOCATION Millpond Ln., Sherrers Rd (L) Springtime Ln. TL Millpond. ~900' on (R) 5th lot on (R)

SUBDIVISION Timberview BLOCK / SECTION LOT 50 LOT AREA SITE CLASS. DESIGN FLOW L.T.A.R.

Septic Tank: 1000 Gallons; STB 817 Date 1/20/95
Pump Tank: 1000 Gallons; PT 71 Date 1/24/95
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 x 4 Trench Width 36" Max Trench Bottom Depth 30-32" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: Press to Conventional
Repair System Description: Same
Maintenance Agreement Required: ☒ Yes ☐ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

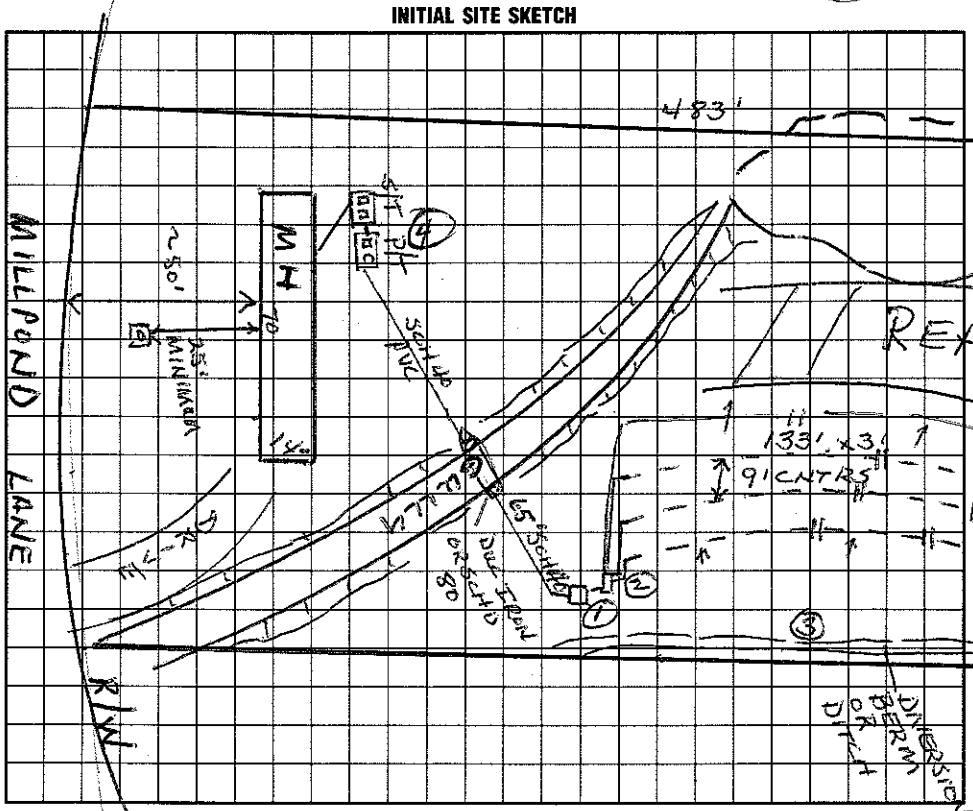
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

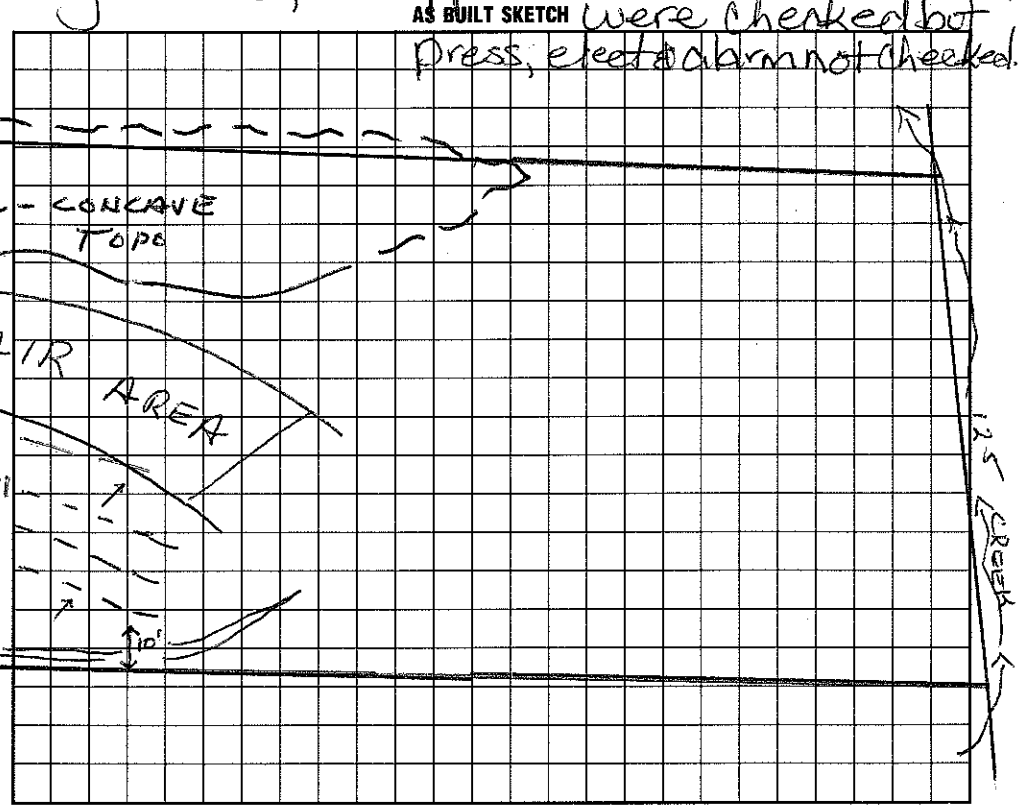
Comments: 1 - WASHER BOX MIN. ~~500~~ 750 GAL CAPACITY (STILLING TANK)
2 - DIST BOX WITH SPEED LEVELERS
3 - UPSLOPE DIVERSION DITCH OR BERM
4 - 7 - 7.5" DRAW DOWN PER PUMP CYCLE - MAX 150 DOSE

Comments: Sch 80 buried under gully area
Gully cleanout. Washer box 2.25 x 2.25 x 2
This Septic System was Not Finaled by ICHD, it appears that ~~Tanks & drainline~~ were checked but Press, effect & alarm not checked.

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: William R Bowers Installed by: WT Norwood Const.

Improvement Permit by: Wesley Sparks RS. date 4/28/95 Certificate of Completion by: date

Existing System Inspection by: date Operation Permit by: date

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