IREDELL COUNTY HEALTH DEPARTMENT

4005102703

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

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

PROPERTY DESCRIPTION NO. 17480 DATE 3/10/94 TAX MAP NO. Pt 1E A56A Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Kenny Young

ADDRESS 327 Caldwell Dr Mooresville, NC 28115 PHONE: Business _____ Home _____

LOCATION Johnson Dairy Rd, Tr off Thomas Rd. to 3rd drive on (R)

SUBDIVISION N/A BLOCK / SECTION _____ LOT _____ LOT AREA 1 Ac SITE CLASS. P DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 8 & 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.

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other _____

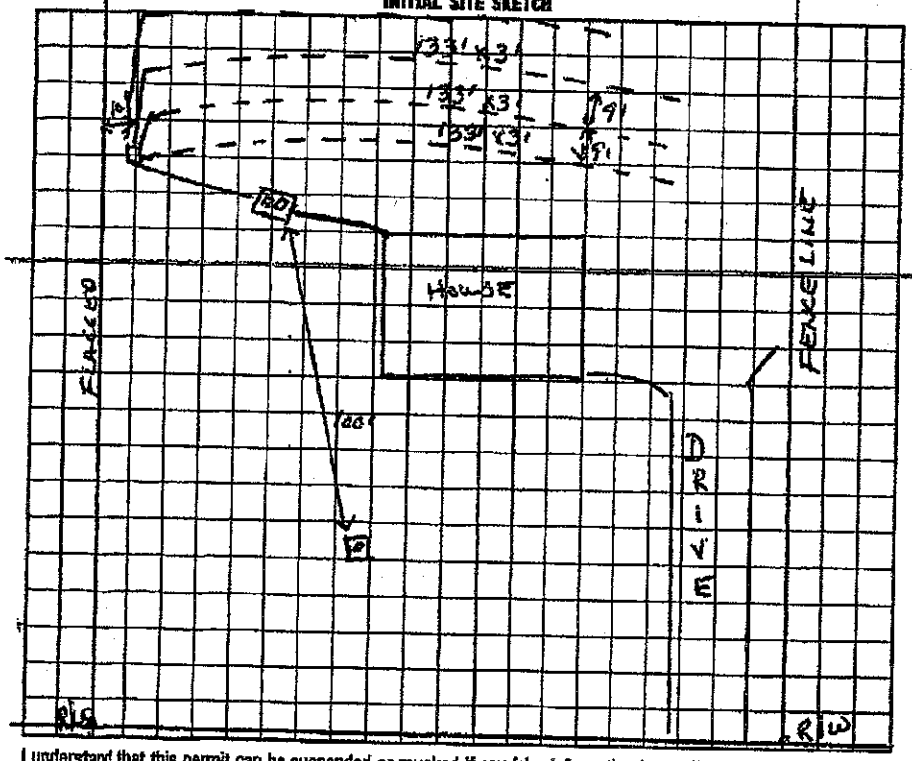
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

Comments:

Comments: Installed as drawn

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. JOHNSON DAIRY RD.

Signed: Bonnie M. Young

Improvement Permit by: Wesley Sparks R.S. date 3/10/94

Existing System Inspection by: _____ date _____

Installed by: Ray Beaver

Certificate of Completion by: Wesley Sparks R.S. date 9/13/94

Operation Permit by: _____ date _____

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