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. 3780 DATE 4/12/96 TAX MAP NO. 1N5E8 4666774391 Watershed: ☒ Yes ☐ No

OWNER OR CONTRACTOR Lynette Broadway PHONE: Business _____ Home 664-5430

ADDRESS 128 Linwood Rd. Mooresville, NC 28115

LOCATION Main St TR Linwood Rd to first house on R 128 Linwood

SUBDIVISION No BLOCK / SECTION _____ LOT 1 LOT AREA _____ SITE CLASS. _____ DESIGN FLOW 480 L.T.A.R. _____

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: 1000 Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 0 Square Feet 0 Linear Feet _____

No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: Existing System

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees _____

☐ Other _____

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing (Partial) ☐ Basement wo/plumbing

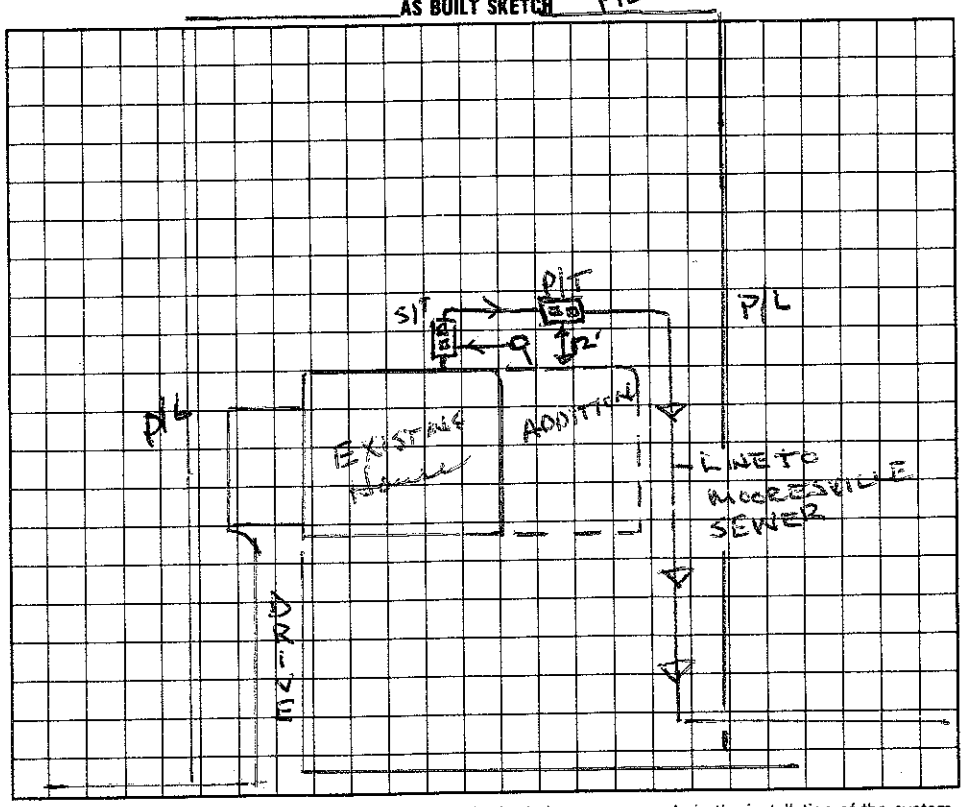
Water Supply:
☐ Individual
☐ Community
☐ Public

Comments: Lift station to Mooresville Sewer

Comments:

INITIAL SITE SKETCH

AS BUILT SKETCH P/L



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.

LINWOOD RD.

Signed: _____

Improvement Permit by: _____ date _____

Existing System Inspection by: _____ date _____

Installed by: _____

Certificate for Completion by: Existing System: Wendy Sparks RS. date 4/12/96

Operation Permit by: _____ date _____

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