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. 2997 Baptist DATE 10/20/94 TAX MAP NO. IM A 5 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR ~~Grace Methodist~~ Church PHONE: Business 663-5261 Home

ADDRESS PO Box 1122 Mooresville NC 28115

LOCATION 150E on (G) JUST BEFORE OVERHEAD. BRIDGE RD.

SUBDIVISION N/A BLOCK / SECTION LOT N/A LOT AREA ~ 3.3 Ac. SITE CLASS. P DESIGN FLOW 500GPD. L.T.A.R. ~~.75~~ .3

Septic Tank: ~~1500~~ Gallons; STB 1014 Date 6/11/94

Pump Tank: ~~1000 Gal~~ Gallons; PT Date

Pump Make: Model (1166) Serial No. (555)

Nitrification Field: No Fields 1 Square Feet 2000 Linear Feet ~~666~~ 555

No Lines ~~7~~ 5 Trench Width 36" Max Trench Bottom Depth 28-30" Gravel Depth 12"

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

System Description: PRES. MANIFOLD - CONV.

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☑ Other CHURCH 100@5 GAL

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

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: 500 GPD. - CONTRACTOR TO CALL H.D. TO WORK OUT DESIGN OF PRES. MANIFOLD - MUST BE IN CONCRETE BOX

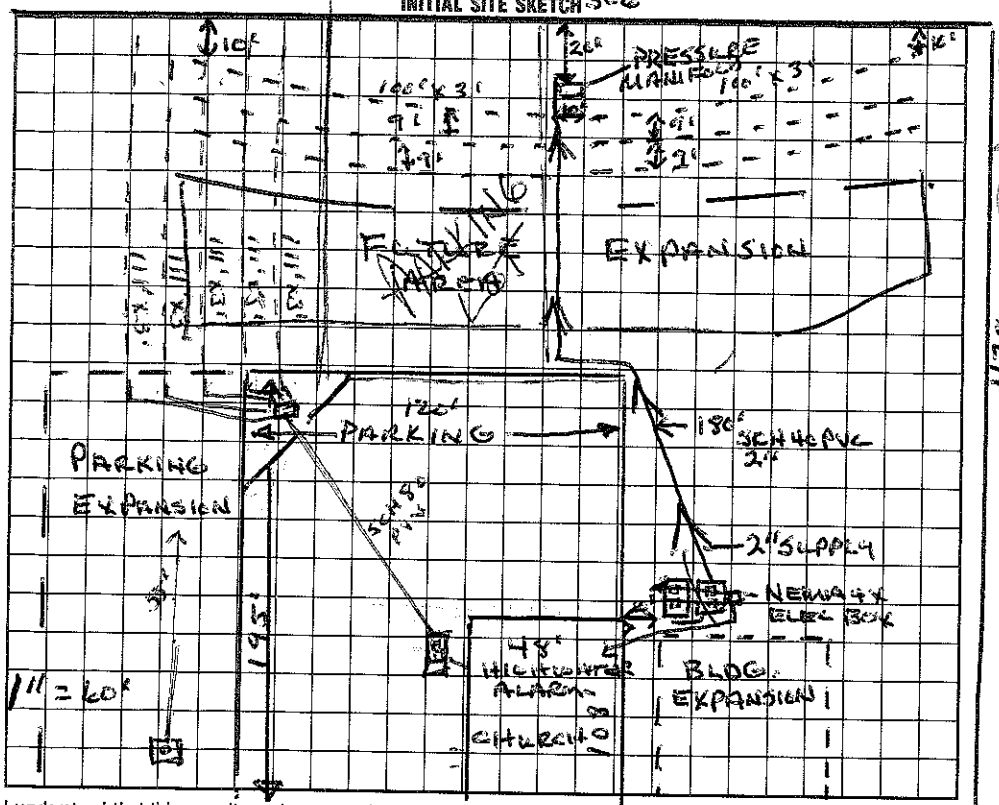
HOPE TO INCREASE TO ~ 1000 GPD. IN FUTURE

Comments:

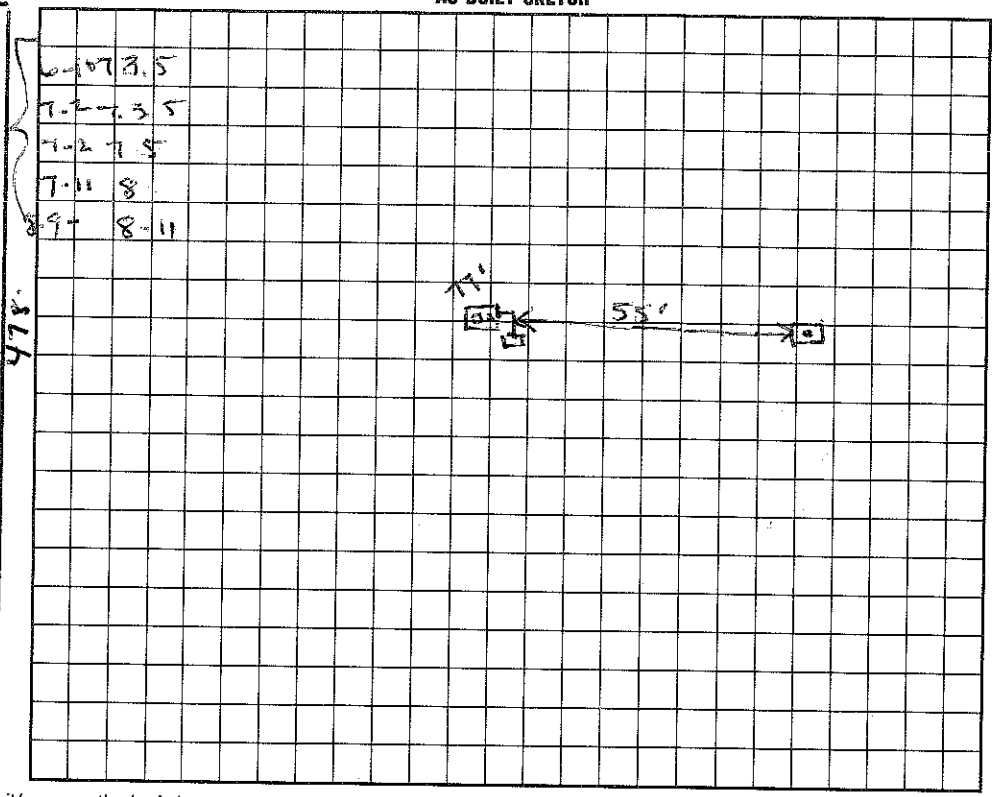
~~4~~ 4/26/95 Changing from pressure dist. to gravity with 555 lin ft. of conventional trenches

See new permit 1/19/96

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: Danny Henderson

Improvement Permit by: Wesley Sparks RS. date 10/20/94

Existing System Inspection by: date

Installed by: Cent Demarcus

Certificate of Completion by: Wesley Sparks RS. date 5/9/95

Operation Permit by: date

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