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. 069978 DATE 10-17-97 TAX MAP NO. 4703 63 8980 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR RON MERRILL PHONE: Business Home 872-4844

ADDRESS 228 SUZANNE LANE, STATESVILLE, NC 28677

LOCATION US 70 W, TL SHADY REST LANE, TR SUZANNE LANE, NEAR END ON RIGHT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 10.11 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB 1017 Date 6-28-98

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No. Fields 1 Square Feet 1440 Linear Feet 480

No. Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

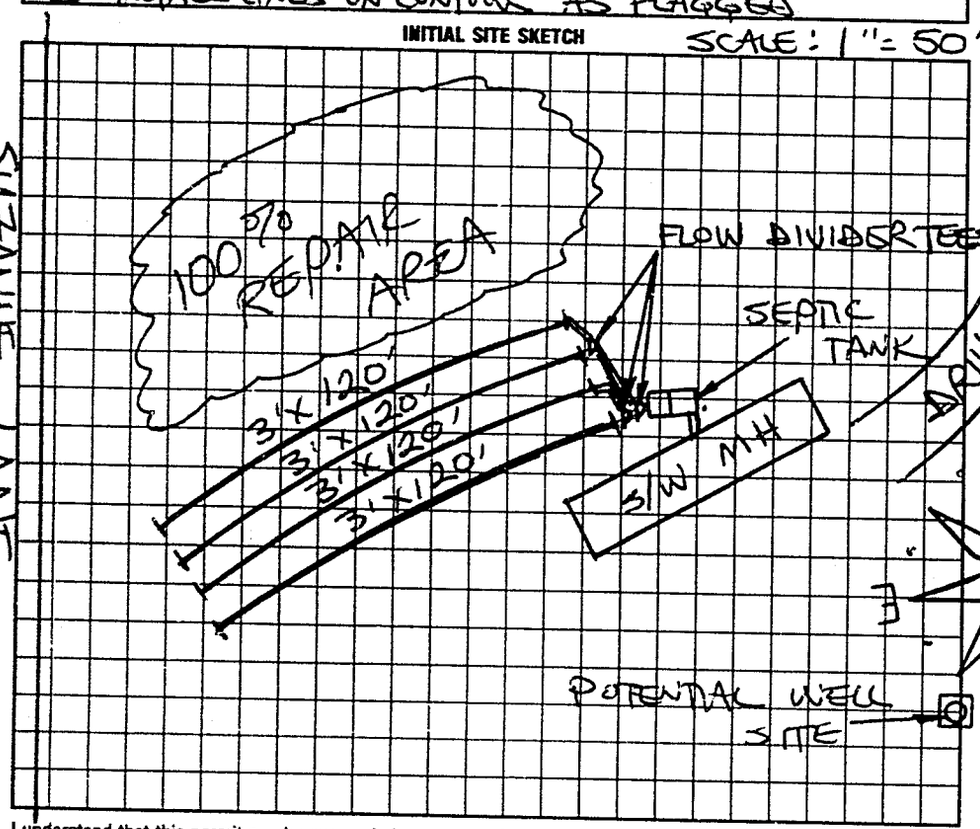
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public WELL

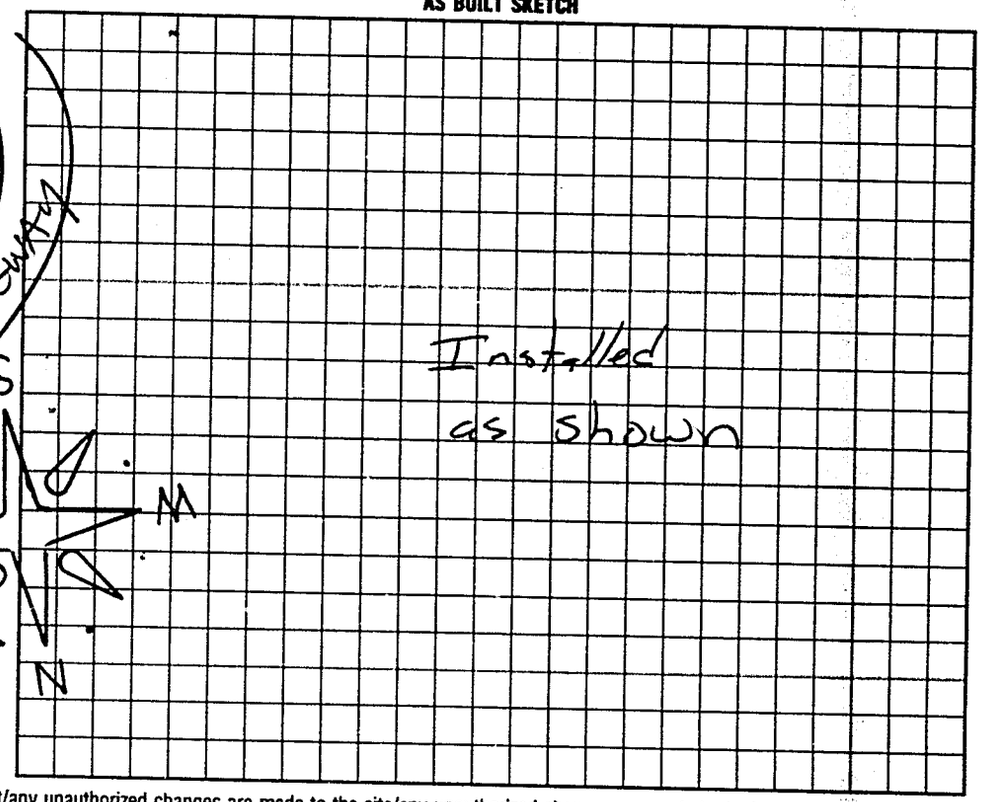
Comments: ① USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR LINES.
② KEEP SYSTEM MINIMUM 100' FROM WELL.
③ INSTALL LINES ON CONTOUR AS FLAGGED

Comments:

INITIAL SITE SKETCH SCALE: 1" = 50'



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. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: Ronald D Merrill

Improvement Permit by: STEVE HEDRICK date 10-17-97

AUTH. TO CONST ~~Existing System Inspection~~ by: STEVE HEDRICK date 10-17-97

Installed by: A-1 Backhoe

~~Certificate of Completion by:~~ date

Operation Permit by: Mark C Outz RS date 8-31-98

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