IREDELL COUNTY HEALTH DEPARTMENT

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

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

OPERTY DESCRIPTION NO 21856 DATE 8-17-15 TAX MAP NO 8M-6-A-7,8 Watershed Yes ✓No

NER OR CONTRACTOR Stacy St. John PHONE Business Home 873-6612

DRESS 2476 Amity Hill Rd. Statesville, N.C. 28677

CATION I-40W Tl Old Mtn. Rd. TR Rowlah Rd. Stay Straight Mock Mill Rd. Tl Mocking bird Dr. Lot on R in corner.

BDIVISION Mock Mill Run BLOCK / SECTION — LOT 7 & 8 LOT AREA ~2.5 x ~2C SITE CLASS Existing DESIGN FLOW 360 LTAR Existing

eptic Tank: ____ Gallons: STB ____ Date ____	New System Repair System Type: [illegible]	House/Mod Home	No Bedrooms 3	Water Supply: Individual
mp Tank: Existing Gallons: PT ____ Date ____	System Description Existing System	✓Mobile Home	No Bathrooms 2	Community
mp Make: ____ Model System Serial No Inspection	Repair System Description Inspection	Business	No Employees ____	✓Public
trification Field: No Fields ____ Square Feet ____ Linear Feet ____	Maintenance Agreement Required Yes No	Other		
Lines ____ Trench Width ____ Max Trench Bottom Depth ____ Gravel Depth ____	Slab ✓Crawl Space Basement w/plumbing Basement wo/plumbing			

mments:

* Lot and septic system has been vacant for a period of time.

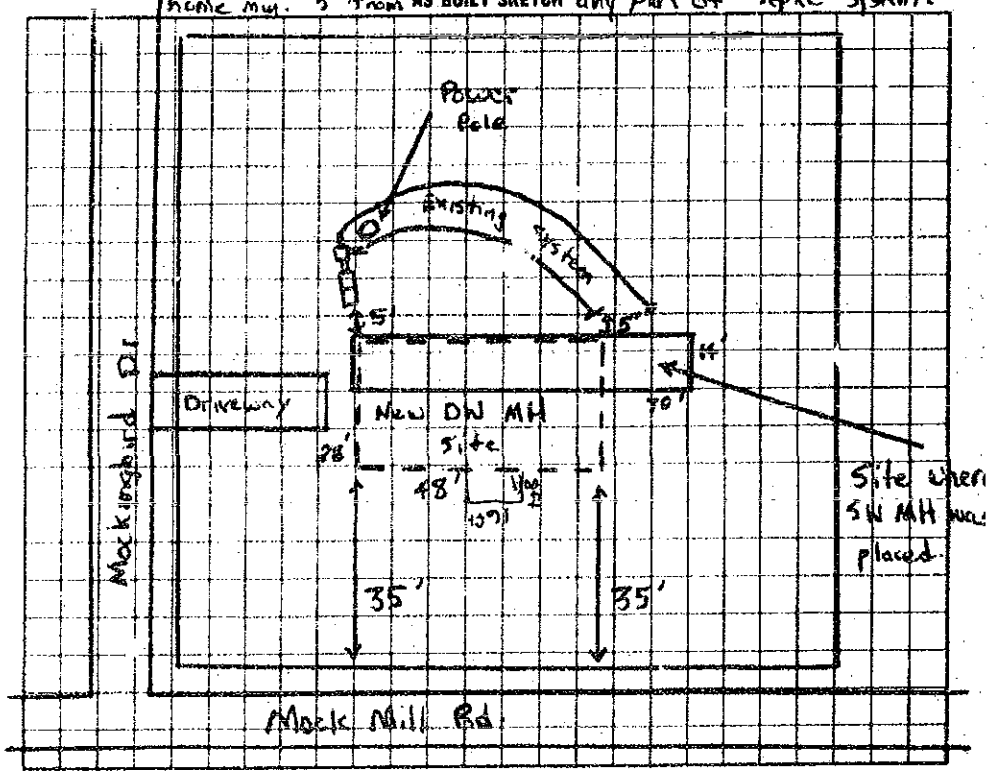
W MH (Rear of home) to be place where rear of SW initials, d extra width to go toward Mock Mill Rd.

Comments: Replacing 2 Bedroom SW MH with a 3 Bedroom DW MH. Jack Clinton, prior land and lot owner said system was sized for 3 Bedroom Homes. He said all his lots were sized that way. System shows no visible signs of malfunction at time of inspection. Rec

home may. 5' from any part of septic system.

INITIAL SITE SKETCH

AS BUILT SKETCH



The proposed Porch addition does not appear to impact the existing septic system.

**NOTE: _____

Reid Cook R.S.

Date: 3-26-09

ICHD-Environmental Health Division

derstand 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.

ed: _____ Installed by _____

rovement Permit by: _____ date _____ Certificate of Completion by _____ date _____

ting System Inspection by: Reid M Cook date 8-17-15 Operation Permit by _____ date _____

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

JAN. 22, 1989 12:16