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. 22470 DATE 11-20-95 TAX MAP NO. 8M-9-A-3 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR ERNEST H. KUNGE PHONE: Business Home 872-6645

ADDRESS 374 LONG ISLAND ROAD STATESVILLE, NC 28677

LOCATION I-40 W TR OLD MTN RD, TR CONIFER DR TL PINE PARK COURT, AT END ON CUL-DE-SAC

SUBDIVISION PINE RIDGE ST BLOCK / SECTION LOT 3 LOT AREA 0.602 NRE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT2

Septic Tank: 1000 Gallons; STB 1012 Date 2-6-96

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 360

No Lines 4 Trench Width 36 Max Trench Bottom Depth 24-36" Gravel Depth N/A

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

System Description: CHAMBERED GRAVITY-FED

Repair System Description: CHAMBERED GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

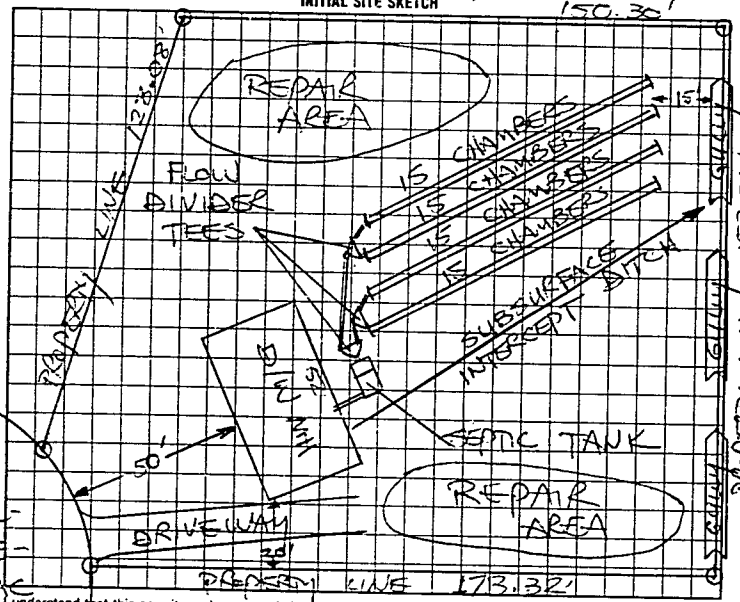
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: ① INSTALL SUBSURFACE INTERCEPT DRAIN AS SHOWN ② USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO EACH OF FOUR LINES ③ INSTALL 60 CHAMBERS IN FOUR LINES AS SHOWN, ON CONTOUR

Comments: Inspected Everything but Interceptor Drain 4-4-96 JCM

INITIAL SITE SKETCH



AS BUILT SKETCH

Same as initial 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.

AUTHORIZATION TO CONSTRUCT IS VALID FIVE (5) YEARS FROM DATE OF ISSUANCE. IMPROVEMENT PERMIT HAS NO EXPIRATION DATE.

Signed:

Improvement Permit by: STEVE HEDRICK date 11-20-95

~~Authorization to Construct~~ ~~Existing System Inspection~~ by: STEVE HEDRICK date 4-3-96

Installed by: Tommy Frye

~~Certificate of Completion~~ by: date

Operation Permit by: R. G. Moore date 4-8-96

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

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