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. Repair DATE 6-18-93

OWNER OR CONTRACTOR Amos Smith PHONE: Business TAX MAP NO. Repair

ADDRESS Home 585-2773

LOCATION Hwy 90N TL Lackey Farm Rd. (1.5), MH on R approx 1 mile.

SUBDIVISION NA BLOCK / SECTION LOT LOT AREA Ample SITE CLASS. Existing L.T.A.R. Existing

Water Supply: ☐ Individual ☐ Community ☑ Public county water

Septic Tank: Existing Gallons; STB — Date —

Pump Tank: — Gallons; PT — Date —

Nitrification Field: No Fields 2 Square Feet 630 Linear Feet 210'

No Lines 3 Trench Width 36" Trench Depth 36" Gravel Depth

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

System Description: Conventional, gravity

Repair System Description:

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

Garbage Disposal: ☐ Yes ☑ No

Auto. Dishwasher: ☐ Yes ☑ No

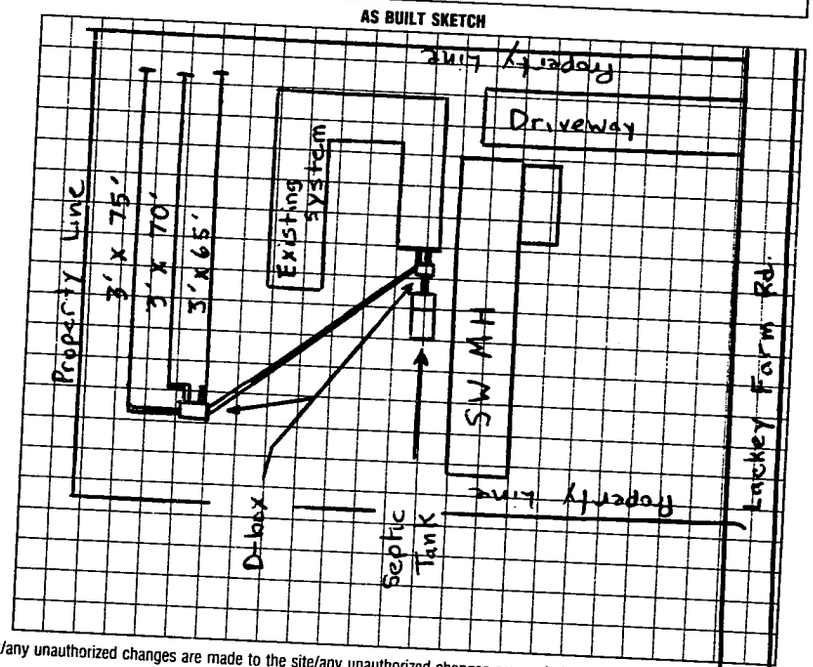
Auto. Washing Machine: ☑ Yes ☐ No

Other

Comments Fed existing system and repair line equal.

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:

Improvement Permit by: Michael L. Dennis date 5-26-93

Existing System Inspection by: date

Installed by: Phil Rogers Grading

Certificate of Completion by: Michael L. Dennis date 6-18-93

Operation Permit by: date

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