#63787

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. 24718 DATE 9-6-96 TAX MAP NO. 9Q-2-A-6 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR MICHAEL D WEBER PHONE: Business Home 528-3733

ADDRESS 140 CARDINAL LANE, MOORESVILLE, NC 28115

LOCATION NC 90 W TR MINRAY ROAD, TL ABNER ROAD TL PRIVATE DRIVE ~1.0 MILE, OFF ROAD

SUBDIVISION QUAIL POINTE BLOCK / SECTION LOT 6 LOT AREA 10 Acres SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.35 GAD/FT²

Septic Tank: 1000 Gallons; STB 101C Date 7-3-96

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1600 Linear Feet 533

No Lines FOUR Trench Width 36" Max Trench Bottom Depth 30-36" 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 No. Bedrooms 4

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees

☑ Other

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

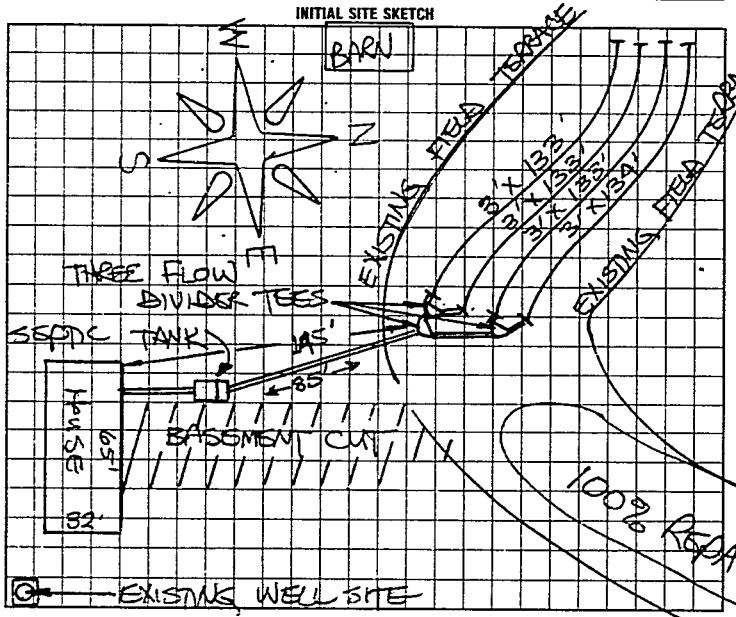
Water Supply: ☑ Individual ☐ Community ☐ Public WELL

~700'

Comments: ① USE THREE FLOW DIVIDER TEES TO ACHIEVE EQUAL DISTRIBUTION INTO FOUR EQUAL LENGTH LINES AS SHOWN ON CONTOUR ② KEEP SYSTEM MINIMUM 100 FROM WELL

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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.

AUTH. TO CONST. IS VALID FOR A PERIOD EQUAL TO THE VALIDITY OF THE I.P. NOT TO EXCEED FIVE YEARS. I.P. W/ SITE PLAN IS VALID FIVE YEARS

Signed: Installed by: JAMES HUNTER

Improvement Permit by: STEVE HEDRICK date 9-6-96

~~Authorization to Construct~~ Existing System Inspection by: STEVE HEDRICK date 9-6-96

~~Certificate of Completion by:~~ date

Operation Permit by: STEVE HEDRICK date 10-10-96

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