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. 16565 DATE 6/28/93 TAX MAP NO. 90-A-34

OWNER OR CONTRACTOR DONALD J. DOUGLAS PHONE: Business Home

ADDRESS P.O. BOX 655, STATESVILLE, NC 28687

LOCATION NC HWY 115 N, TL MIDWAY ROAD, ~ 3.9 MILES ON (L) PS

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

Water Supply: ✓ Individual ☐ Community ☐ Public

Septic Tank: EXISTING Gallons: STB Date

Pump Tank: Gallons: PT Date

Nitrification Field: No Fields 2 Square Feet Linear Feet EXISTING

No Lines Trench Width Trench Depth Gravel Depth

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

System Description: CONV, GRAVITY

Repair System Description:

Maintenance Agreement Required: ☐ Yes ✓ No

House/Mod. Home

✓ Mobile Home 14X60

Business

Other

No. Bedrooms 2

No. Bathrooms 2

No. Employees

Garbage Disposal: ☐ Yes ✓ No

Auto. Dishwasher: ✓ Yes ☐ No

Auto. Washing Machine: ✓ Yes ☐ No

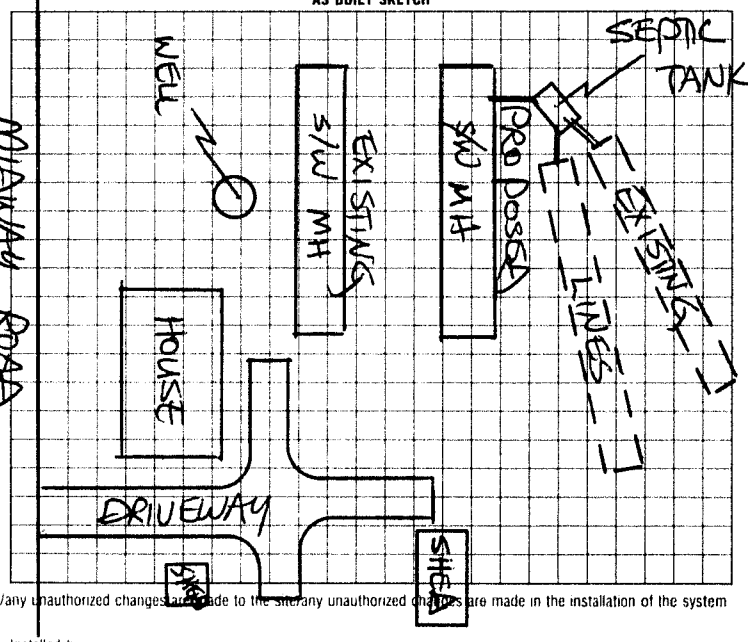
Other

✓ Slab Crawl Space Basement w/plumbing Basement wo/plumbing

Comments (1) KEEP SYSTEM MINIMUM 5' FROM MH.

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: date

Existing System Inspection by: STEVE HEDRICK date 6/28/93

Installed by

Certificate of Completion by date

Operation Permit by date

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