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. 69184 DATE 8-30-97 TAX MAP NO. 4711385472 PT Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Chris Davidson PHONE: Business 528 6192 Home

ADDRESS PO Box 5602

LOCATION Buffalo Shoals Rd TR Clara Dr. After Pineville Rd 4th/5th lot left

SUBDIVISION Ironman Trace BLOCK / SECTION 4 LOT 3+4 LOT AREA 1acre+ SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 5-9-98

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 810 Linear Feet 270

No Lines 4 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth

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

System Description: Conv. Gravity

Repair System Description: Pump To Panels

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

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

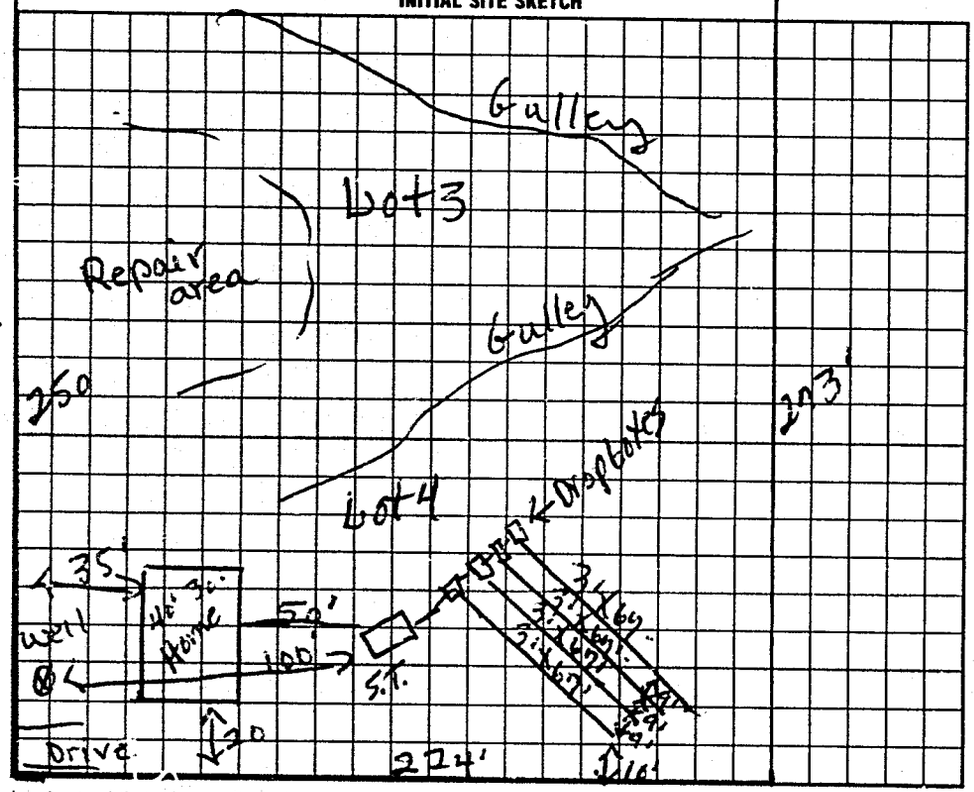
Water Supply: ☒ Individual ☐ Community ☐ Public

Comments:

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Comments:

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. Improvement Permit is valid for 60 months from date of issuance.

Signed:

Improvement Permit by: R. C. Moore date 8-30-97

Existing System Inspection by: R. C. Moore date 8-30-97

Authorization to Cover.

Installed by: Chris Davidson

Certificate of Completion by: date

Operation Permit by: R. C. Moore date 10-2-98

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

Authorization to Cover Expires 60 mos From issue