IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

Watershed: ☐ Yes ☑ No

PROPERTY DESCRIPTION NO. 17368 DATE 11-8-93 TAX MAP NO. 3Q-B-14 Home 528-5925

OWNER OR CONTRACTOR Wade S. Lamberth PHONE: Business

ADDRESS Rt. 14 Box 349 Statesville N.C. 28677

LOCATION I40W TL old Mtn. Rd. TR Buffalo Shoals Rd. TR Eufola Rd TR Low Lake Rd. 1st Lot on R.

SUBDIVISION Weeks Lamberth BLOCK / SECTION LOT 11 LOT AREA 120'x200' SITE CLASS. P.S. DESIGN FLOW 240 L.T.A.R. .35 gpd/ft²

Septic Tank: 1000 Gallons; STB 1012 Date 8-9-93

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model — Serial No. —

Nitrification Field: No Fields 1 Square Feet 690 Linear Feet 230'

No Lines 3 Trench Width 36" Max Trench Bottom Depth 30"

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

System Description: conventional, gravity

Repair System Description: PPBPS, gravity

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth 12" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

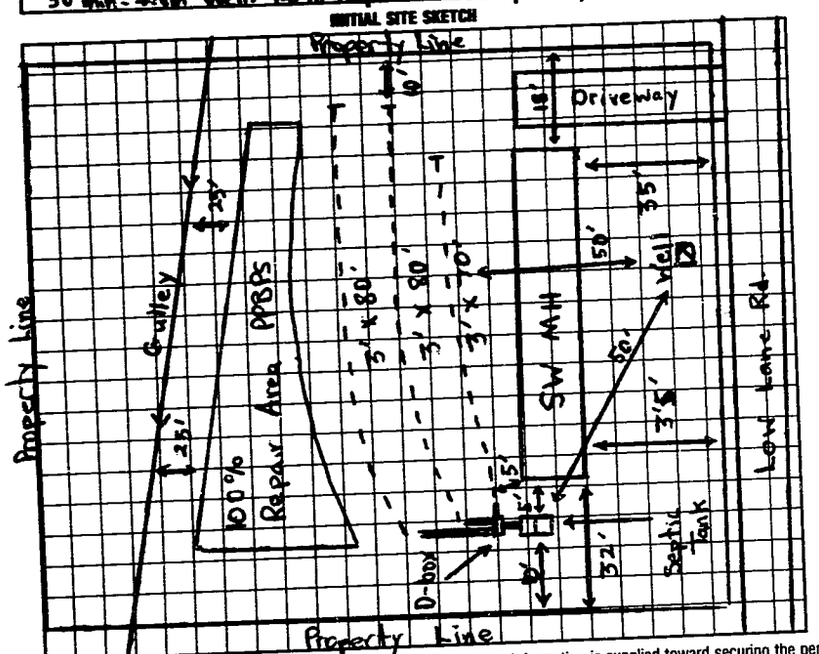
No. Bedrooms 2 No. Bathrooms 2 No. Employees —

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: INSTALL SYSTEM SHALLOW (no deeper than 30" to trench bottom) Keep lines on contour, keep system 5' from foundation of home, 10' from all property lines, and 50 min. from well. 100% Repair below system, PPBPS, gravity fed.

Comments: Home not on lot at time of inspection. Keep home min. 5' from any part of septic system. 100% Repair Area below system. Conventional, gravity fed.

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: Wade S Lamberth

Improvement Permit by: Michael J. Dennis date 11-9-93

Existing System Inspection by: date

Installed by: AAA Enterprises

Certificate of Completion by: Michael J. Dennis date 11-9-93

Operation Permit by: date

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