48717

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. 16602 DATE 7-13-93

OWNER OR CONTRACTOR Sun-Wood Builders PHONE: Business 872-0921 TAX MAP NO. 3Q-6-A-14

ADDRESS Home

LOCATION I40W TL Old Mtn. Rd. TR Buffalo Shoals Rd. TR Eufola Rd. TR Big Tree Rd. Lot on L

SUBDIVISION Woodland Acres BLOCK / SECTION LOT 14 LOT AREA ~~.69~~ acres SITE CLASS. PS, I L.T.A.R. .35 gal/ft²

Water Supply: ☑ Individual ☐ Community ☐ Public Well To Be Located

Septic Tank: 1000 Gallons: STB 1012 Date 7-26-93

Pump Tank: — Gallons: PT — Date —

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345'

No Lines 4 Trench Width 36" Trench Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, 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

Garbage Disposal: ☐ Yes ☑ No

Auto. Dishwasher: ☑ Yes ☐ No

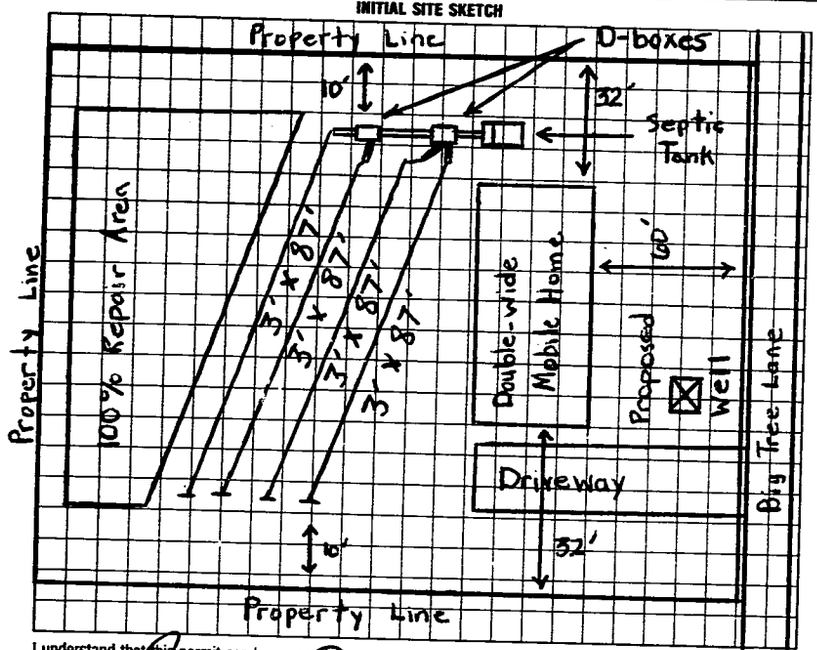
Auto. Washing Machine: ☑ Yes ☐ No

Other

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

Comments Keep Nitrification Lines on contour, keep system 10' from all property lines, 5' from foundation of home, and 50' from any well. 100% Repair Area below system, conventional, gravity fed.

INITIAL SITE SKETCH



AS BUILT SKETCH

SAME AS INITIAL SKETCH

* Well Not Located yet.

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 J. Dennis date 7-13-93

Existing System Inspection by: date

Installed by: Tommy Cathcart

Certificate of Completion by: Michael J. Dennis date 9-15-93

Operation Permit by: date

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