IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281 50500

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

PROPERTY DESCRIPTION NO. 17904 DATE 3-8-94 TAX MAP NO. 8J-B-45 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Jerry W. Price PHONE: Business _____ Home 878-0330

ADDRESS Rt. 3 Box 436-P Statesville, N.C. 28677

LOCATION I40W TL Old Mtn. Rd. TR Lewis Ferry Rd 1st house on R past Three Oaks Lane.

SUBDIVISION NA BLOCK / SECTION — LOT — LOT AREA .93 acre SITE CLASS. P.S. DESIGN FLOW 360 L.T.A.R. .35 gpd / ft²

Septic Tank: 1000 Gallons; STB 1012 Date 3-20-94

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model — Serial No. —

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

No Lines 4 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: conventional, gravity fed

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

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

Water Supply: ☐ Individual ☐ Community ☑ Public

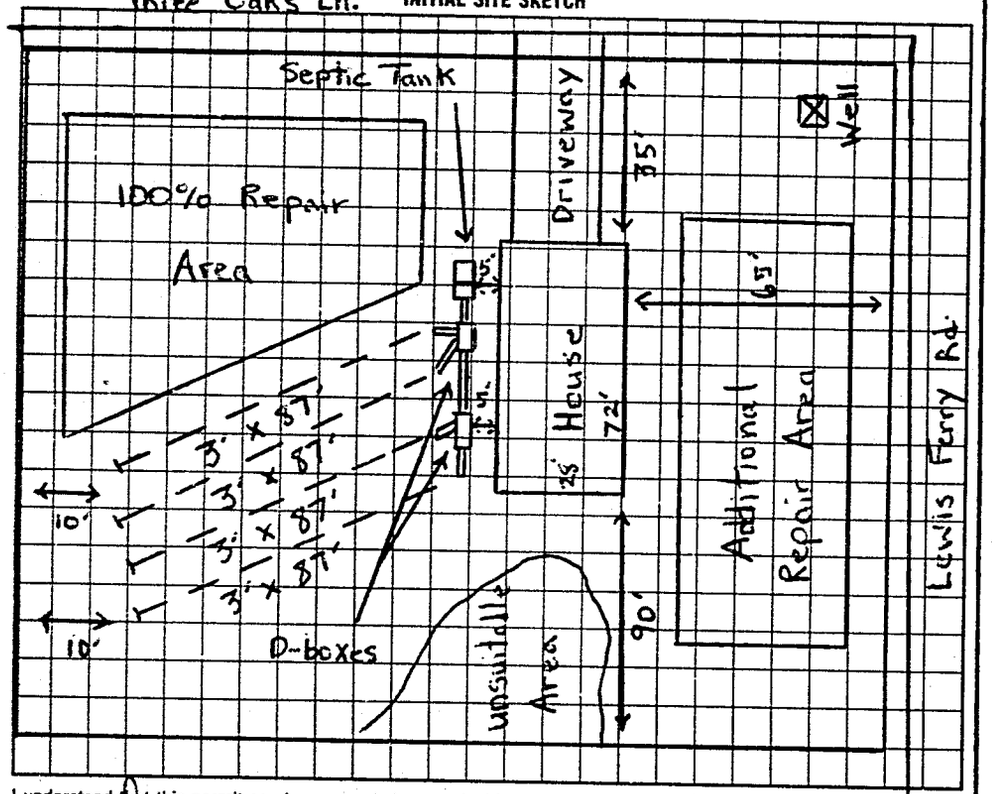
Comments: Install System shallow (no deeper than 24" to trench bottom) Keep Nitrification Lines and Trenches on contour. Keep system 5' from foundation of home, 10' from all property lines, 10' from water line, and 50' min. from any well. Existing Three Oaks Ln.

Comments: No drainline (old existing) detected from existing system. Did not have to dig up old system. 100% Repair Above system, due to deck the repair area will need to be changed to pump to Repair. System also located further down hill due to deck that was not shown on application Septic system located in area where new system is to be installed. If existing system crosses property line, dig up old system 10' from property line to the line. Fill in with clay. If old lines are crossed with new lines dig up there as well. 100% Repair above system, conventional, gravity fed. Additional repair in front yard.

* Call before Installation *

SAME AS INITIAL SKETCH

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: Jerry W. Price

Improvement Permit by: Michael J. Dennis date 3-8-94

Existing System Inspection by _____ date _____

Installed by: Forest Shuford

Certificate of Completion by: Michael J. Dennis date 6-3-94

Operation Permit by: _____ date _____

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