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. Repair DATE 6-2-93

OWNER OR CONTRACTOR Jimmy Neal PHONE: Business _____ TAX MAP NO. Repair

ADDRESS _____ Home 872-0640

LOCATION I40W TL Old Mtn. Rd. TR Celeste-Eufola Rd. 6th house on L.

SUBDIVISION Paul Lewis Acres BLOCK / SECTION _____ LOT _____ LOT AREA Ample SITE CLASS. _____ L.T.A.R. _____

Water Supply: ☐ Individual ☐ Community ☑ Public County water

Septic Tank: Existing Gallons; STB — Date —

Pump Tank: — Gallons; PT — Date —

Nitrification Field: No Fields 2 Square Feet 600 Linear Feet 200'

No Lines 3 Trench Width 36" Trench Depth 36" Gravel Depth 12"

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

System Description: Conventional, gravity

Repair System Description Conventional, gravity

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees —

☐ Slab ☑ Crawl Space ☐ Basement w/plumbing

Garbage Disposal: ☐ Yes ☑ No

Auto. Dishwasher: ☐ Yes ☑ No

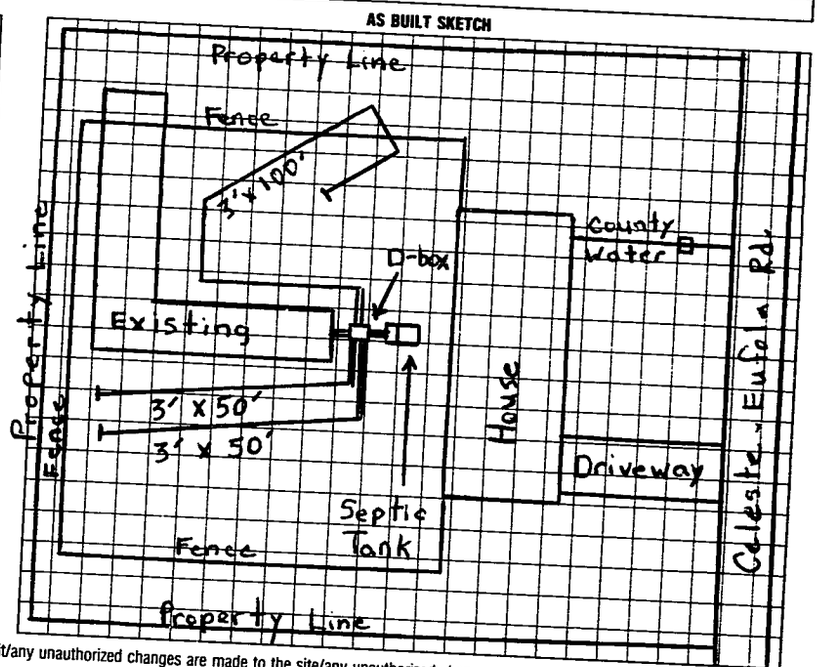
Auto. Washing Machine: ☑ Yes ☐ No

Other _____ ☐ Basement wo/plumbing

Comments Fix leak in house., Remove maple trees due to fibrous roots.

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: Michael Q. Dennis date 4-12-93

Existing System Inspection by: _____ date _____

Installed by: AAA Enterprises.

Certificate of Completion by: Michael Q. Dennis date 6-2-93

Operation Permit by: _____ date _____

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