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 1917 DATE 12-8-94 TAX MAP NO. 8711-1-15 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR A-V mobile Homes PHONE: Business 873-1014 Home

ADDRESS Star mackville Hwy Statesville

LOCATION Garden Park Estates Turn Happy Lane off Bethlehem Rd

SUBDIVISION BLOCK / SECTION LOT 3 LOT AREA SITE CLASS DESIGN FLOW T.A.R.

Septic Tank: 1000 Gallons, SW 620 Date 9-6-94 | Pump Tank: Gallons, PT Date | Pump Make: Model Serial No | Nitrification Field No Fields 1 Square Fee: 1035 Linear Foot 345 | No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" | Gravel Depth 12"

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

System Description: Con Cranity

Repair System Description

Maintenance Agreement Required ☐ Yes ☐ No

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

☐ Home/Mod. Home No Bedrooms 3

☒ Mobile Home No Bedrooms 2

☐ Business No Employees

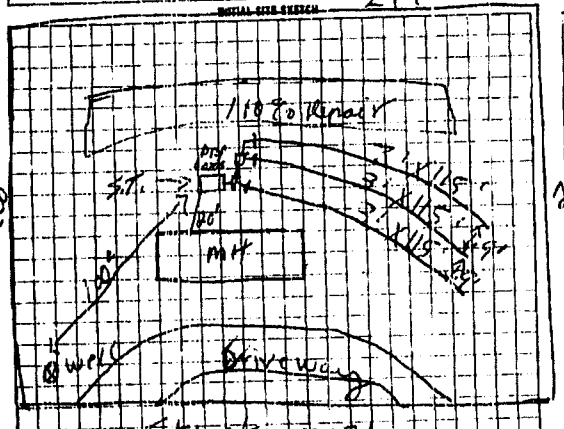
☐ Other

Water Supply: ☐ Individual ☐ Community ☐ Public

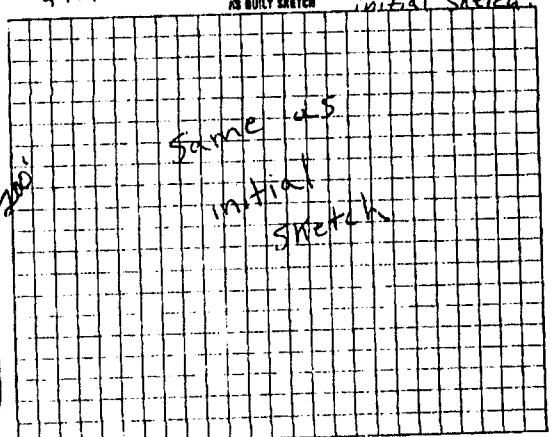
Comments: Well + Home Not on site at Time of this inspection Keep Well + Home at proper distance from S.T. System as shown on Initial Sketch

Comments: 2 1/2

INITIAL SITE SKETCH



AS BUILT SKETCH 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: [signature] Installed by: Sammy Beaver

Improvement Permit by R. C. Moore date 12-8-94 Certificate of Completion by R. C. Moore date 12-27-94

Existing System Inspection by date Operation Permit by date

HEALTH DEPT COPY WHITE INSPECTION COPY (PINK) GREEN OWNER COPY (PINK) YELLOW INSPECTION COPY (YELLOW) PINK OWNER COPY (PINK) BLUE

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