022091

4:00

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. 22090 DATE 9-12-95 TAX MAP NO. 8K-12-A-(2 Pt) Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Bob Compton PHONE: Business Home 872 2954

ADDRESS 123 Rockwood Lane Statesville

LOCATION ~~Garden Pk Es~~ 70E Th oldtmnrd Th Bethlehem Th Happy Ln 3rd lot RT

SUBDIVISION Garden Park BLOCK / SECTION LOT 2A LOT AREA 108 X 200 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model: Serial No.

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

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

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

System Description: Conv. Gravity

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

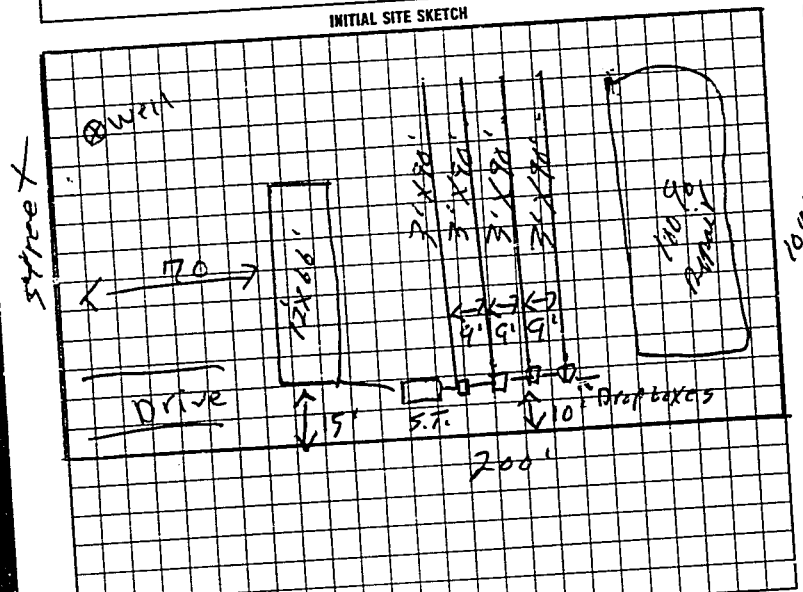
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

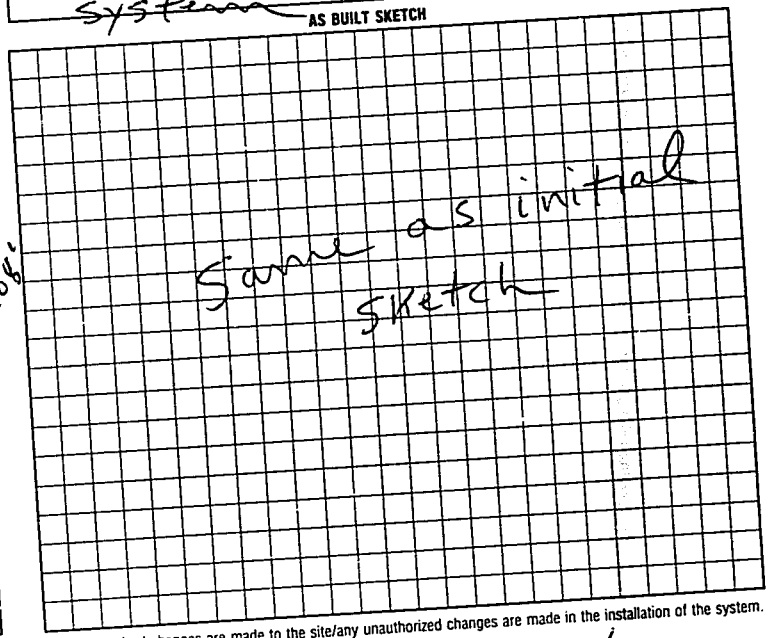
Comments:

Comments: Well Not located at Time of this ispection Keep Proper Distance from System

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.

Signed: Bob Compton

Improvement Permit by: P.C. Moore date 9-12-95

Existing System Inspection by: date

Installed by: B. Sigmon const.

Certificate of Completion by: date

Operation Permit by: P.C. Moore date 4-4-96

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

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