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. 21884 DATE 8-22-95 TAX MAP NO. 9D 12-A-40 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR KATHY KEIGER PHONE: Business Home 871-1192

ADDRESS P.O. Box 6174 STVL, NC 28677

LOCATION NC 90 W TR LITTLE FARM RD, TL CEDAR RIDGE TR CEDARBROOK, LAST ON (L)

SUBDIVISION CEDAR RIDGE BLOCK / SECTION LOT 40 LOT AREA 0.7 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240
No Lines 2 Trench Width Max Trench Bottom Depth Gravel Depth 12"

☐ New System ☐ Repair System Type: I ☒ II, IV, V, VI
System Description: CONV. GRAVITY
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

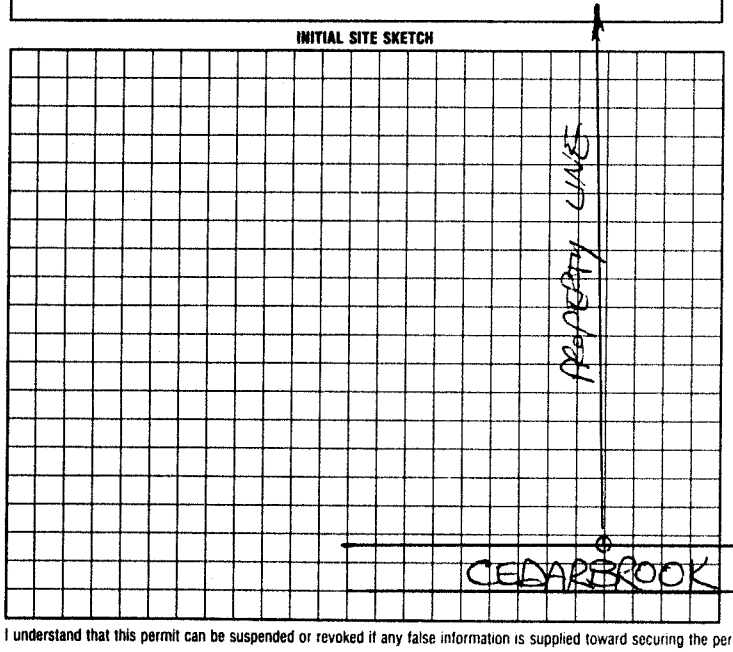
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☐ Community
☒ Public

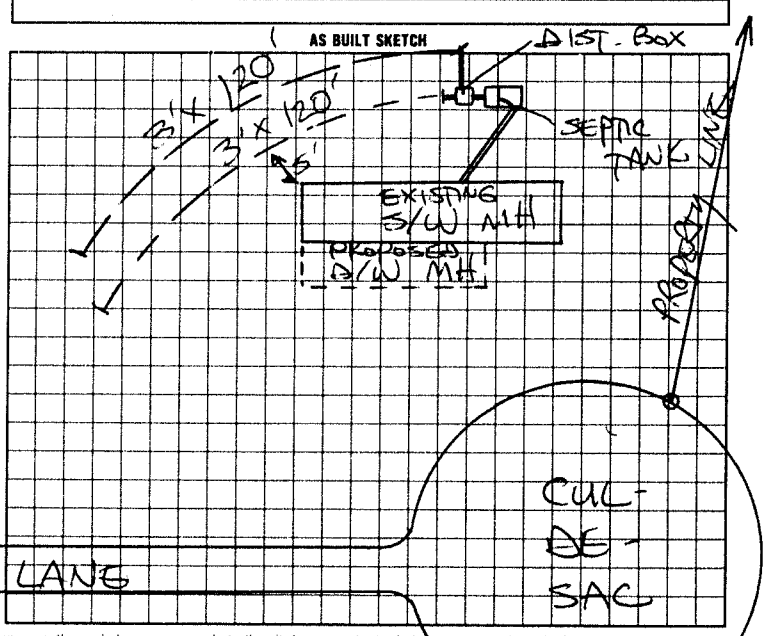
Comments:

Comments:

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:

Improvement Permit by: date

Existing System Inspection by: STEVE HENDRICK date 8-22-95

Installed by:

Certificate of Completion by: date

Operation Permit by: date

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