# IREDELL COUNTY HEALTH DEPARTMENT

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

55919

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

PROPERTY DESCRIPTION NO. ~~[illegible]~~ 21097 DATE 5-15-95 TAX MAP NO. 353-10-14 Watershed: ☑ Yes ☐ No

OWNER OR CONTRACTOR Chris Davidson PHONE: Business 528 3[illegible]6192 Home WS4 PA

ADDRESS PO Box 5602 Sta

LOCATION Buffalo Shoals Rd TL Poppy Lane TL First Road 2nd lot left

SUBDIVISION BLOCK / SECTION LOT 107-A LOT AREA 1.186 acres SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. 13

Septic Tank: 1000 Gallons; STB 1012 Date 4-15-95

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field; No Fields 1 Square Feet 840 Linear Feet 280

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: LL Pump

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

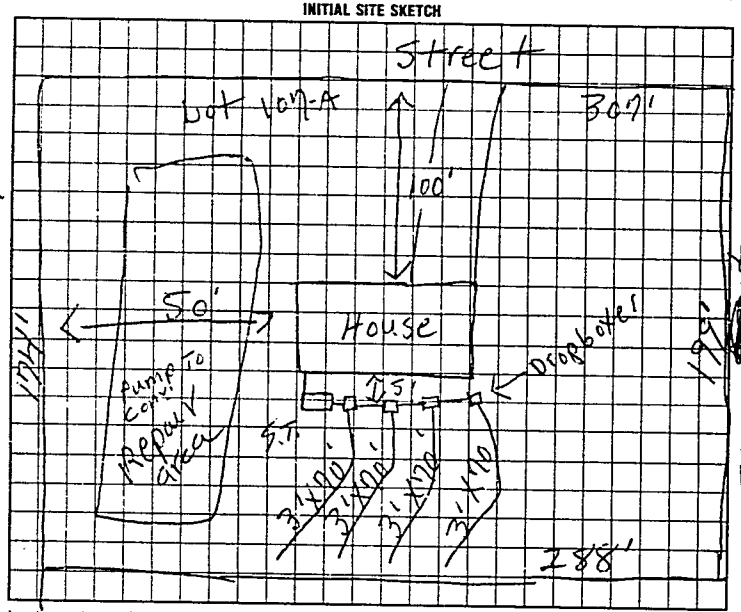
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

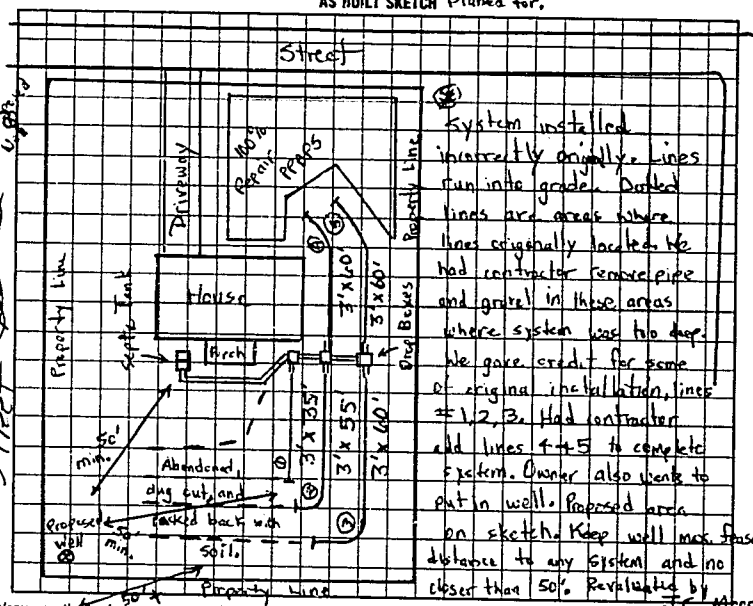
Comments:

Comments: System installed out of contour. C.O.C denied on 8-2-95, Revaluation to correct situation to be done next day with second opinion by J.C. Moore. 100% Repair NON PPDFS. in front yard. Also, house location or size changed from initial layout. Porch added to back was not

INITIAL SITE SKETCH




AS BUILT SKETCH Planned for.




System installed incorrectly originally. Lines run into grade. Dotted lines are areas where lines originally located. We had contractor remove pipe and gravel in these areas where system was too deep. We gave credit for some of original installation, lines #1, 2, 3. Had contractor add lines 4 + 5 to complete system. Owner also wants to put in well. Proposed area on sketch. Keep well min. feasible distance to any system and no closer than 50'. Revaluation by J.C. Moore and M. Dennis on 8-3-95

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: Chris Davidson Forest Shuford

Improvement Permit by: J.C. Moore date 5-15-95

Existing System Inspection by: date

Installed by: Forest Shuford

Certificate of Completion by: Michael Q. Dennis / J.C. Moore date 8-3-95

Operation Permit by: date

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