892-2035

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. 067732 DATE 6-28-97 TAX MAP NO. 4722333350 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Chris Davidson PHONE: Business 528-6122 Home

ADDRESS POBox 5002 Statesville NC

LOCATION Old Mtn Rd TL Compton Park Rd TR ~~Brookside~~ (8) Maxwell TR Idlewood lot on (12)

SUBDIVISION Compton Park BLOCK / SECTION LOT 14+15 LOT AREA SITE CLASS. 1/S DESIGN FLOW 360 L.T.A.R. 0.3

Septic Tank: 1000 Gallons; STB 1007 Date 7-15-97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field; No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36in Max Trench Bottom Depth 24in Gravel Depth 12in

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

System Description: Gravity Conventional

Repair System Description: Gravity Conventional Chambers

Maintenance Agreement Required: ☐ Yes ☒ No Pump Pit

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

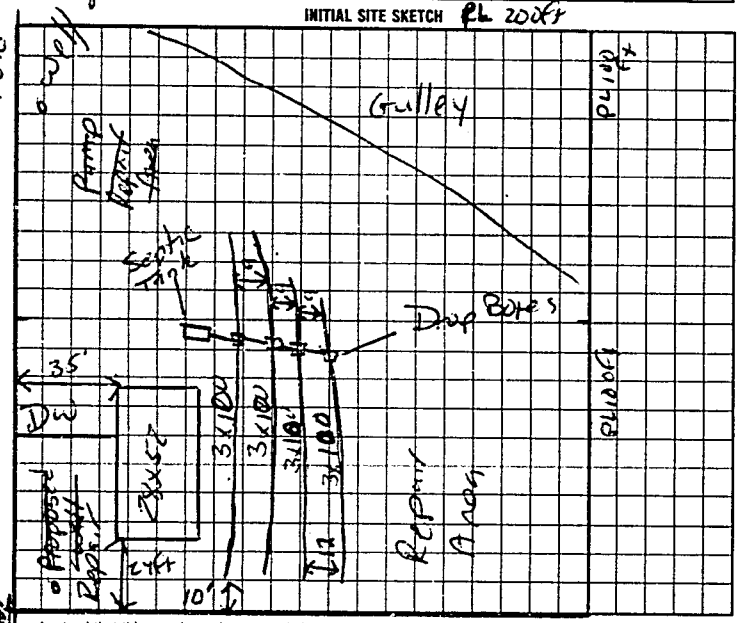
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

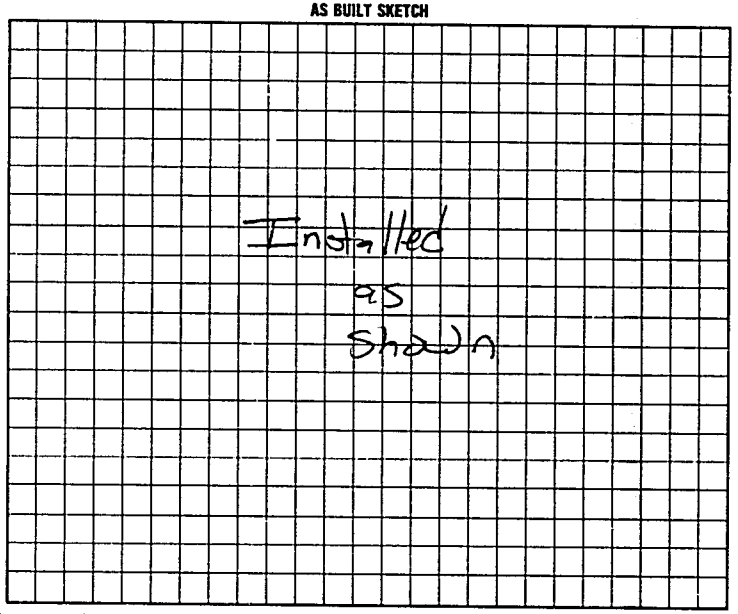
Comments: Keep lines on contour 9ft on center, Trenches NO Deeper than 24in, Repair pumpers-shallow soils Keep well max distance 50+

Comments: * House moved over

INITIAL SITE SKETCH PL 200ft



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. Author. Extension to construct expires 5 yrs from date issued

Signed: Neal Kale

Improvement Permit by: Mark C Outlaw RS date 6-28-97

Author. Extension & Existing System Inspection by: Mark C Outlaw RS date 6-28-97

Installed by: Chris Davidson

Certificate of Completion by: date

Operation Permit by: Mark C Outlaw RS date 8-26-97

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

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