# 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. 067009 DATE June 9, 97 TAX MAP NO. 4722470933 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Debbie Hartness PHONE: Business Home 528-6708

ADDRESS 852 Old Mtn. Rd Statesville

LOCATION from US 21 - Old Mtn. Rd. on right ~200 yds before jct w/ Buffalo Shoals Rd.

SUBDIVISION BLOCK / SECTION LOT LOT AREA ~1Ac+ SITE CLASS. RS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 5-7-97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4@100' Trench Width 36" Max Trench Bottom Depth ~30" Gravel Depth 12"

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

System Description: gravity conventional

Repair System Description: pumped conventional

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

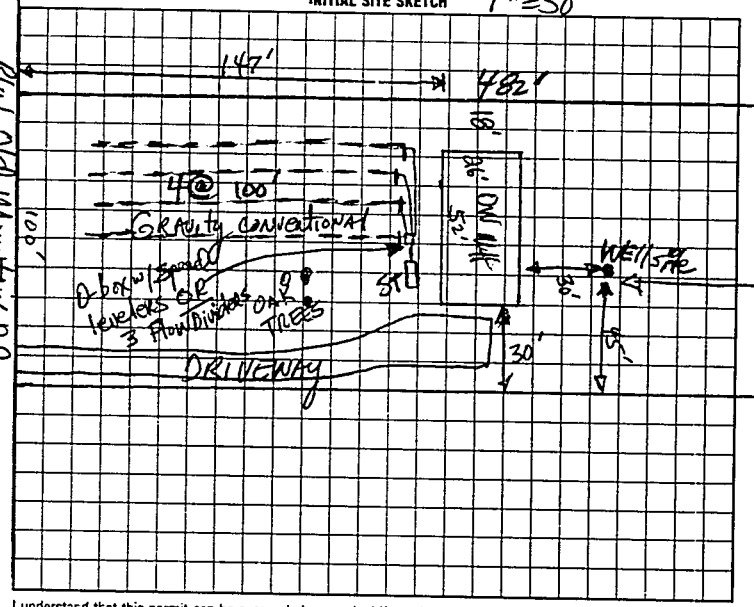
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

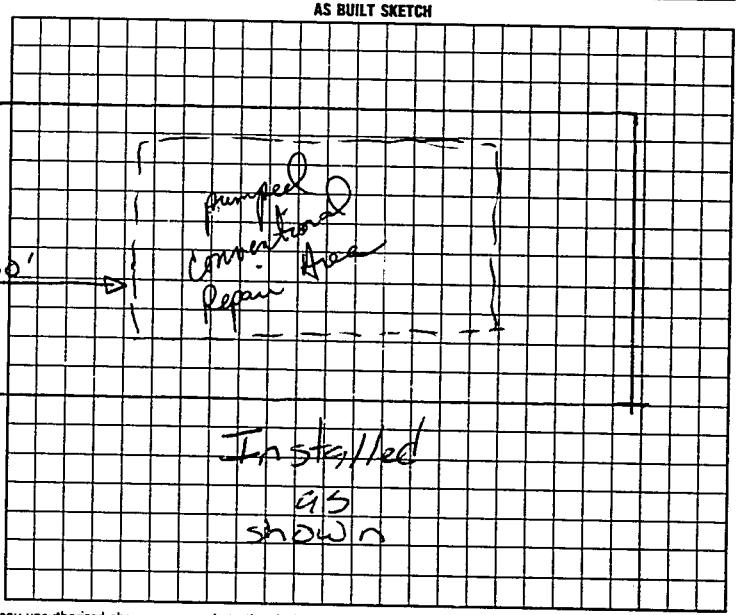
Comments:

Comments:

INITIAL SITE SKETCH 1"=50'




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.

Signed: A Delaine Hartness

Improvement Permit by: D R Johnson RS date 6-9-97

~~Construction Authorization by~~ D R Johnson RS date 6-9-97

Installed by: Tommy Frye

Certificate of Completion by:

Operation Permit by: Mat C.O.C. RS date 07-3-97

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