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. 26187 DATE _____ TAX MAP NO. _____ Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Chris Davidson (Kyles Development Pkg) PHONE: Business _____ Home _____

ADDRESS ~~212 Bobbitt Ln~~ Statesville PO Box 5602 Statesville

LOCATION Corner Old Mtn Rd & Buffalo Shoals (2nd lotent left Old Mtn Rd)

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 0.96C SITE CLASS. P/S DESIGN FLOW 100gpd L.T.A.R. 0.5

Septic Tank: 1000 Gallons; STB ~~794~~ Date 4-22-97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model 252 Serial No. _____

Nitrification Field: No Fields 1 Square Feet ~~333~~ Linear Feet ~~882~~ 84

No Lines 2 Trench Width 36in Max Trench Bottom Depth 36in Gravel Depth 12in

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

System Description: Gravity Chamber

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms ____

☐ Mobile Home No. Bathrooms ____

☒ Business No. Employees 2

☐ Other _____

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

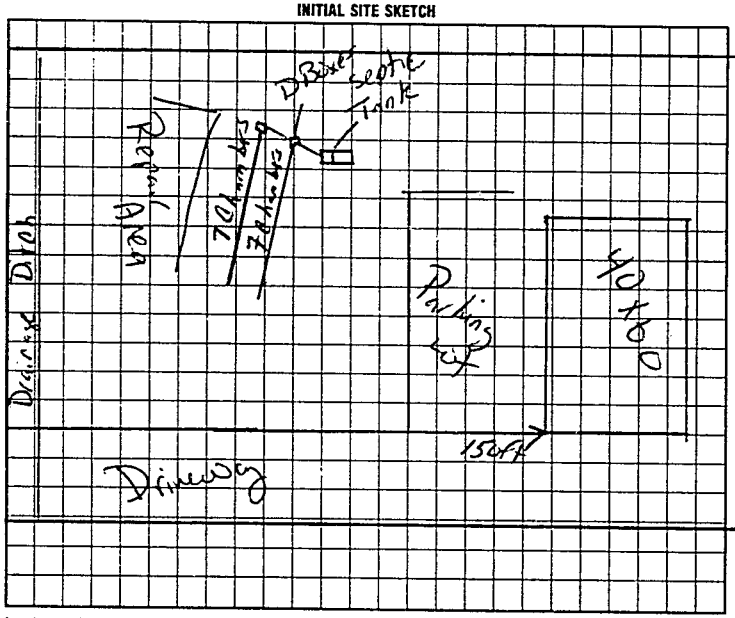
Water Supply: ☒ Individual ☐ Community ☐ Public

Comments: keep lines on contour 9ft on center

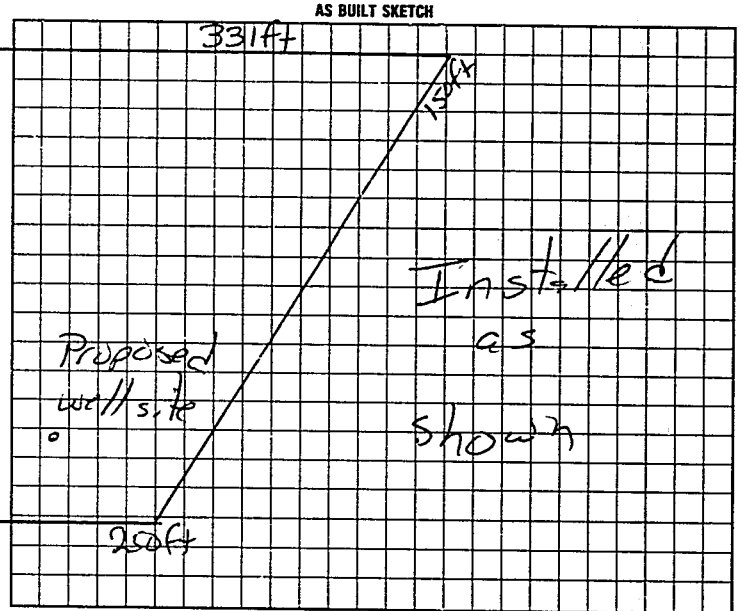
Keepwell 100 ft from system

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. Improvement Permit is valid for 60 months from date of issuance. Authorization to construct expires 5yrs from issue date

Signed: Wes Hale

Improvement Permit by: _____ Mark C Ostby RS date 3-14-97

~~Existing System~~ Authorization to const. Inspection by: _____ Mark C Ostby date 3-14-97

Installed by: James Hudder

Certificate of Completion by: _____ date _____

Operation Permit by: Mark C Ostby RS date 6-23-97

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