IREDELL COUNTY HEALTH DEPARTMENT

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

3:00-3:30 52724

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

PROPERTY DESCRIPTION NO. 19265 DATE 9-8-94 TAX MAP NO. 6E-17-A-99 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR House Crafters PHONE: Business 873-9180 Home

ADDRESS P.O. Box 1717 Statesville, N.C. 28677

LOCATION T40W TL Stamey Farm Rd. TL Hwy 70 TR Airport Rd TR Parker Lake Loop TL Delight loop 3rd lot on R after 90° curve.

SUBDIVISION Lakewood Estates BLOCK / SECTION LOT 99 LOT AREA 1.5 acre SITE CLASS. P.S. DESIGN FLOW 360 L.T.A.R. .35 gpd/ft²

Septic Tank: 1000 Gallons; STB — Date 10/12/94

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model — Serial No. —

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345'

No Lines 5 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

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

System Description: conventional, gravity fed

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other

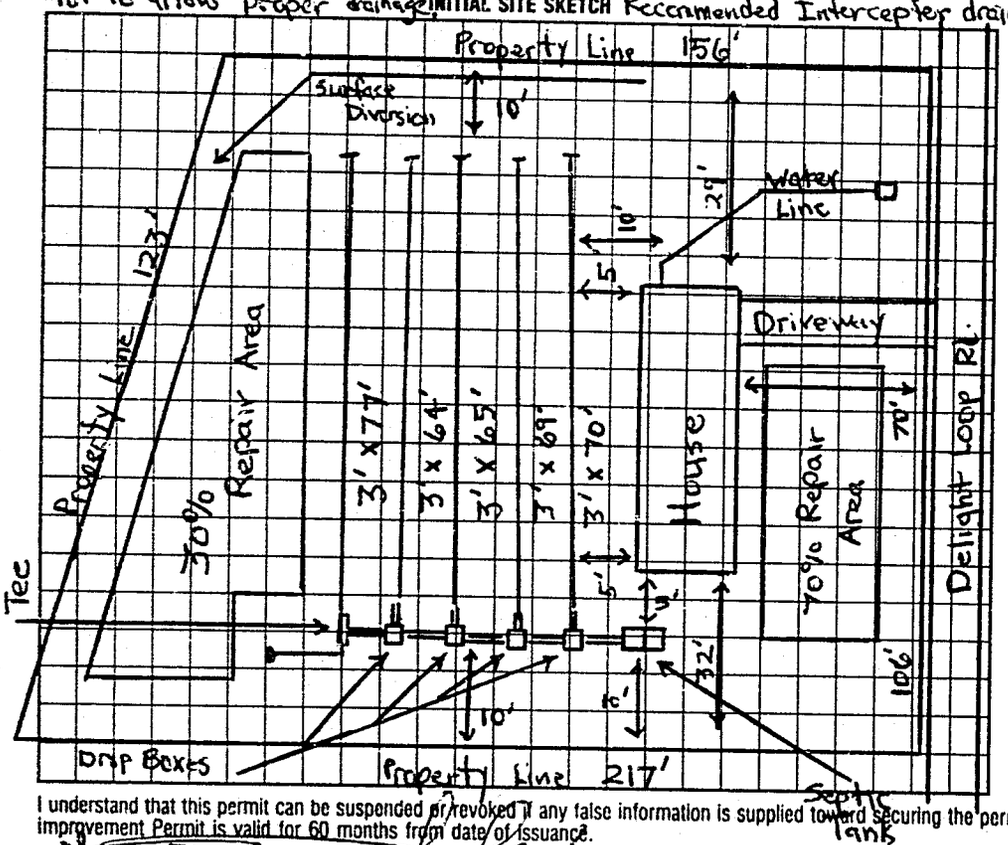
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: INSTALL SYSTEM SHALLOW (no deeper than 24" to trench bottom). Keep lines and trenches on contour. Keep system min. 5' from foundation of home, 10' from all property lines, and 10' from water line. Create surface diversion ditch around system on upper side and landscape lot to allows proper drainage. Recommended Interceptor drain but did not require.

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

60% Repair below system and in front yard, conventional, gravity fed

System installed as shown except 10' section on lowest line

~~not installed per~~ KRS

335 LF Total

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:

Improvement Permit by: Michael G. Dennis date 9-8-94

Existing System Inspection by: date

Installed by: James Hudgins

Certificate of Completion by: date 12/2/94

Operation Permit by: date

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