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. Repair DATE 8-11-97 TAX MAP NO. Repair Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR SC Holton PHONE: Business _____ Home 873-6744

ADDRESS 3207 Westover

LOCATION I-40 to 90 TL TR Bristle Drive TR Westminster TR Westover 1st house on left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1000 Existing Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ____ Square Feet _____ Linear Feet _____

No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: _____

Repair System Description: Pipe from Tank

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 1½

☐ Business No. Employees ____

☐ Other _____

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

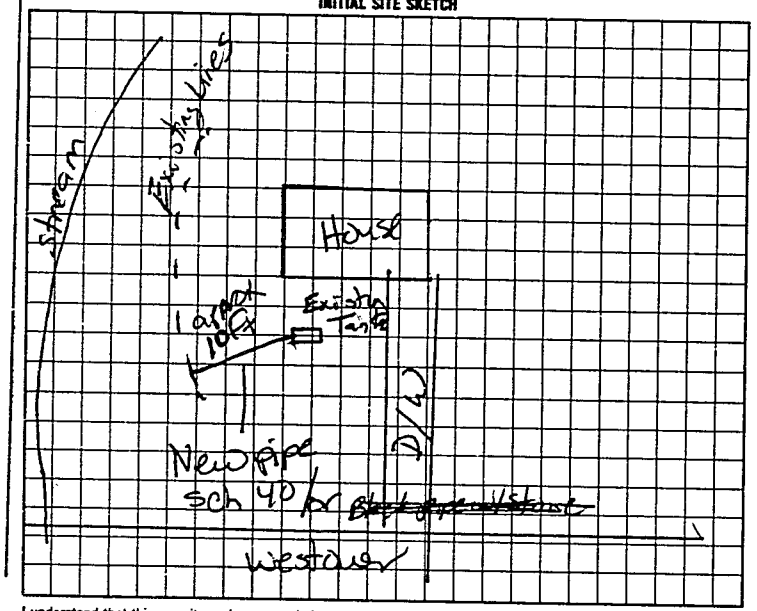
Water Supply: ☐ Individual ☐ Community ☒ Public

Comments:

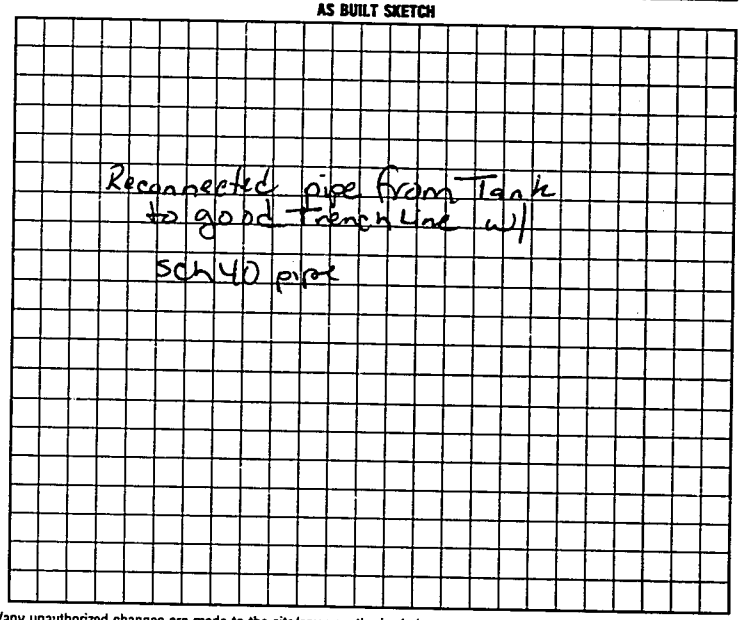
Check Tank and Sanitary T' replace if needed, replace pipe from Tank to Lines. Check lines - may need to add line in future

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.

Signed: Imogene M. Holton

Improvement Permit by: Mary C Ott RS date 8-11-97

Authorization to Const. Existing System Inspection by: Mary C Ott RS date 8-11-97

Installed by: James Huddle

Certificate of Completion by: _____ date _____

Operation Permit by: Mary C Ott RS date 8-12-97

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

08100