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 2-25-97 TAX MAP NO. Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR NELLIE FOX PHONE: Business Home

ADDRESS

LOCATION NC 90W, TR GRAYSON PARK ROAD, TR FAMILY CIRCLE 5TH LOT ON RIGHT

SUBDIVISION BLOCK / SECTION LOT LOT AREA LIMITED SITE CLASS. PS! DESIGN FLOW L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 450 Linear Feet 150

No Lines 1 Trench Width Max Trench Bottom Depth Gravel Depth 12"

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

System Description: CONV. GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms

☒ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

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

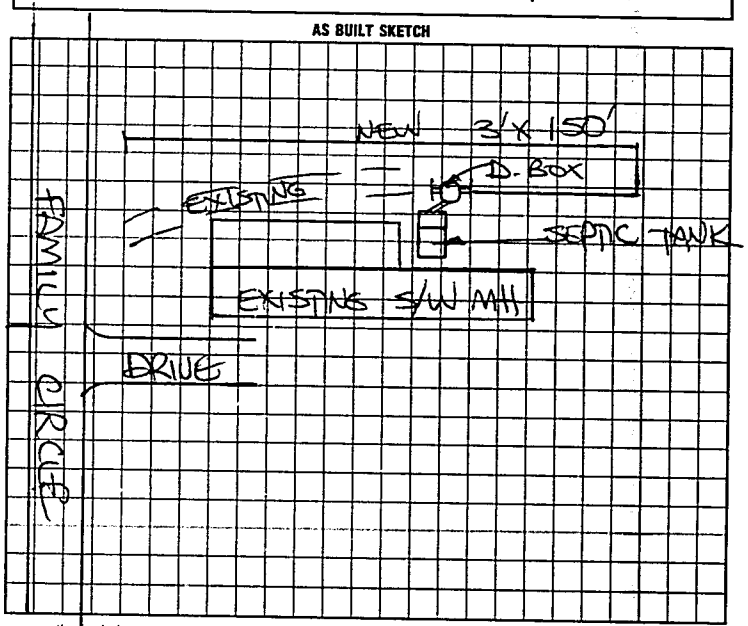
Water Supply:
☐ Individual
☐ Community
☐ Public

Comments:

Comments: TANK PUMPED 2-25-97
NEW DIST. BOX SET

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:

Improvement Permit by: STEVE BROWN date 5-27-92

Existing System Inspection by date

Installed by: DAVID YOUNTZ

Certificate of Completion by: date

Operation Permit by STEVE HEDRICK date 2-25-97

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

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