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. 20313 DATE 2/16/95 TAX MAP NO. 9D-11-A-32 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR JANICE BALL PHONE: Business Home 873-1481

ADDRESS 2016 NORTHSIDE DRIVE, STATESVILLE, NC 28677

LOCATION NC 90 W TR GRAYSON PARK ROAD, TR 2ND FAMILY CIRCLE ENTRANCE, 1ST MH ON (L) EXISTNG

SUBDIVISION GRAYSON PARK BLOCK / SECTION LOT 32 LOT AREA 108 x 200 SITE CLASS PS1 DESIGN FLOW 240 L.T.A.R.

Septic Tank: EXISTNG Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet EXISTNG

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

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

System Description: CONV. GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

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

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

No. Bedrooms 2 No. Bathrooms 2 No. Employees

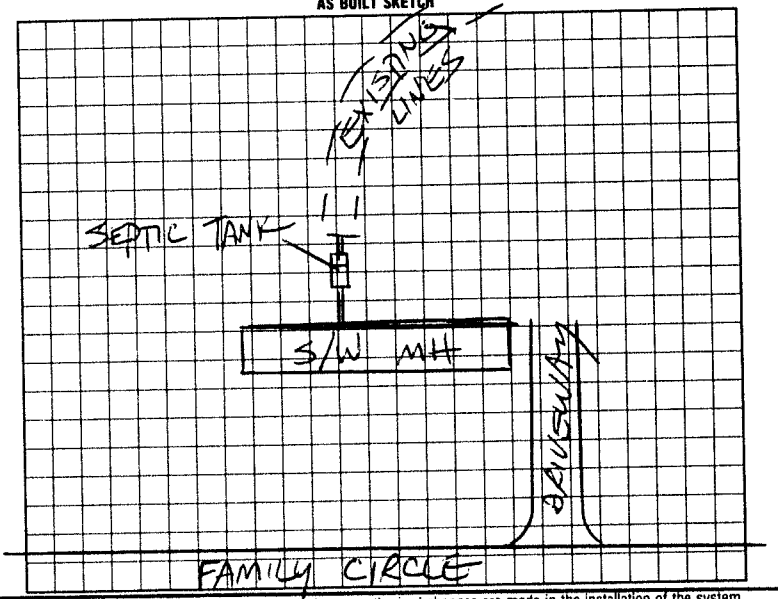
Water Supply: ☐ Individual ☐ Community ☒ Public

Comments:

Comments:
① KEEP MH MINIMUM 5' FROM SYSTEM
② SYSTEM INSTALLED DEEP & LINES RUN INTO THE GRADE, MAY CAUSE BACKUP.

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 HEDRICK date 2/16/95 Installed by:

Existing System Inspection by: STEVE HEDRICK date 2/16/95 Certificate of Completion by: date

Operation Permit by: date

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