53477

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. 1972 DATE 11/3/94 TAX MAP NO. 9A-9-A-133 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR BRUCE PORTER PHONE: Business _____ Home 878-9314

ADDRESS RT. 4, BOX 192-C STATESVILLE NC 28677

LOCATION NC 115 N, TL SCOTTS CREEK RD TL MILLER FARM TRAILER TL REDBUCK AT RIDGEVIEW ON ①

SUBDIVISION DEERCROFT BLOCK / SECTION III LOT 133 LOT AREA 110X 250 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT

Septic Tank: 1000 Gallons; STB 1012 Date 11/5/94

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 Trench Width 36" Max Trench Bottom Depth 18-36" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

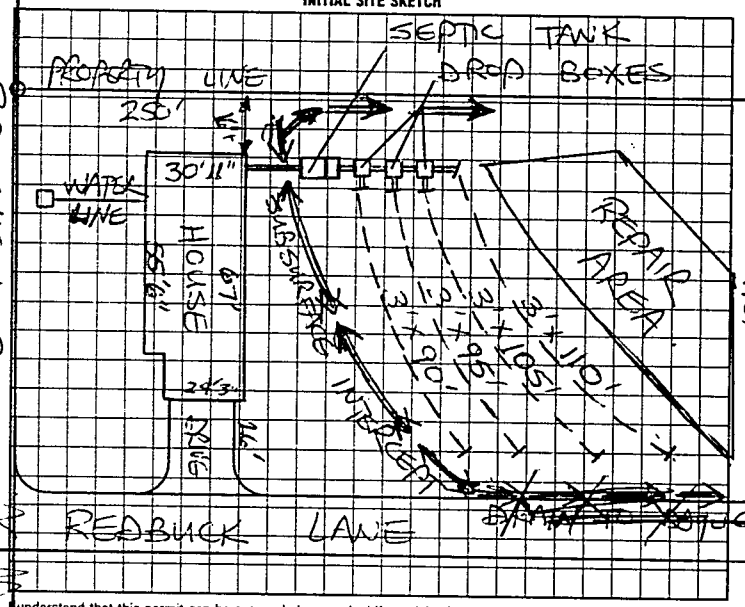
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: ① CONSTRUCT SUBSURFACE INTERCEPT DITCH AT LOCATION SHOWN BEGINNING 4' DEEP SLOPING OUT TO DAYLIGHT ② USE DROP BOX DISTRIBUTION AS SHOWN

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE SKETCH

SUBSURFACE INTERCEPT DRAIN INSTALLED TO DRAIN AWAY FROM STREET

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: + Bruce Porter

Improvement Permit by: STEVE HEDRICK date 11/3/94

Existing System Inspection by: _____ date _____

Installed by: TOMMY FRYE

Certificate of Completion by: STEVE HEDRICK date 3/14/95

Operation Permit by: _____ date _____

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

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