52895

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. 19408 DATE 9/10/94 TAX MAP NO. 9A-9-A-119 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR G & G BUILDERS PHONE: Business Home 871-7295

ADDRESS 184 SERENITY DR. MOCKSVILLE, NC 27028

LOCATION NC 115 N TL SCOTTS CREEK RD, TL MILLS FARM RD, TR ANTLER DR, TL REDBUCK LN TL RIDGEVIEW DR 3RD LT

SUBDIVISION DEERCROFT BLOCK / SECTION III LOT 119 LOT AREA 110' x 285' SITE CLASS. P3 DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 2/9/95

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONVENTIONAL PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

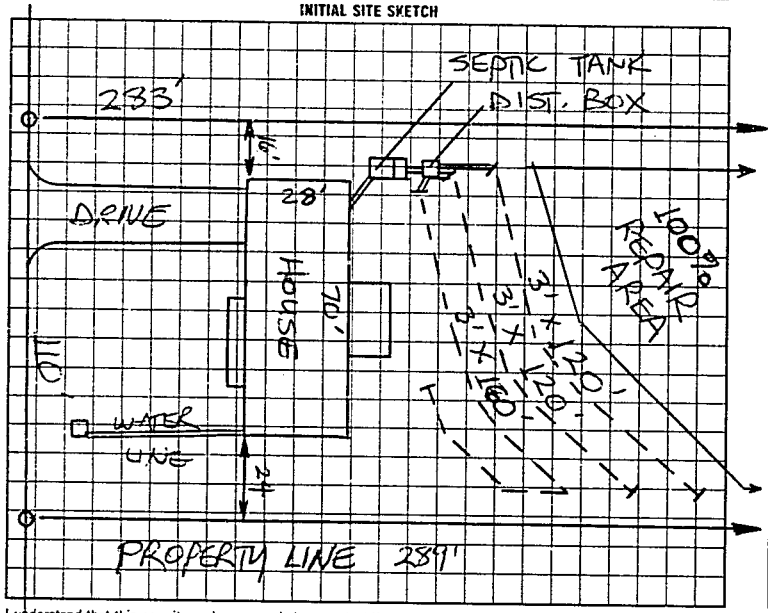
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: ① RAKE TRENCH SIDEWALLS PRIOR TO INSTALLATION OF STONE ② KEEP UPPER TRENCH AS SHALLOW AS POSSIBLE ~36" DEEP.

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: X Michael L. Duthie

Improvement Permit by: STEVE HEDRICK date 9/10/94

Existing System Inspection by: _____ date _____

Installed by: DAVID YOUNTZ

Certificate of Completion by: STEVE HEDRICK date 3/23/95

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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