IREDELL COUNTY HEALTH DEPARTMENT

48827

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 17082 DATE 9/21/93

OWNER OR CONTRACTOR TIM ALEXANDER TAX MAP NO. 9A-9-A-61

ADDRESS RT. 2, BOX 12B STATESVILLE, NC 28677 PHONE: Business 876-1653 Home

LOCATION NC 115 N, TL SCOTTS CREEK, TL MILLER FARM, TR ANTLER DRIVE, ON (L) JUST BEFORE ELK DRIVE

SUBDIVISION DEERCROFT BLOCK / SECTION II LOT 61 LOT AREA 110' x ~275 SITE CLASS. PS L.T.A.R. 0.356 GPD/FT²

Water Supply: ☐ Individual ☐ Community ☑ Public

Septic Tank: 1000 Gallons; STB 358 Date 2/9/94

Pump Tank: ____ Gallons; PT ____ Date ____

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345

No Lines 3 Trench Width 36" Trench Depth 18-36" Gravel Depth 12"

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

System Description: CONV. GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3 Garbage Disposal: ☐ Yes ☑ No

☐ Mobile Home No. Bathrooms 2 Auto. Dishwasher: ☑ Yes ☐ No

☐ Business No. Employees ____ Auto. Washing Machine: ☑ Yes ☐ No

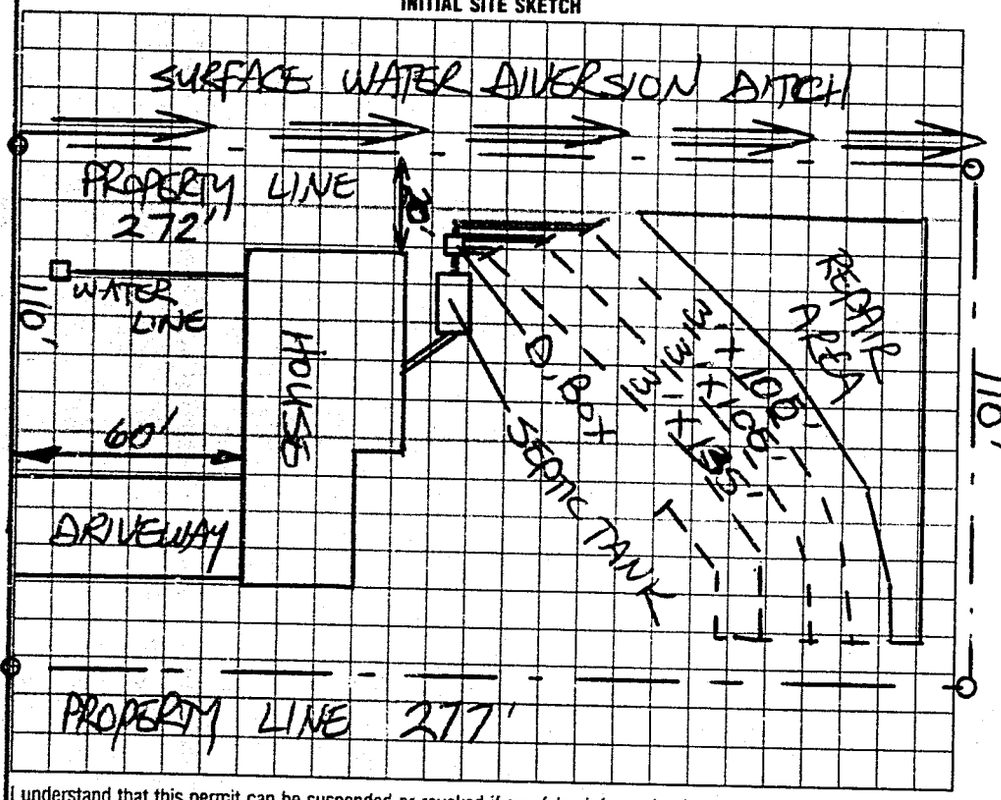
☐ Other ____ Other ____

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

Comments (1) KEEP SYSTEM MINIMUM 5' FROM HOUSE, 10' FROM PROPERTY LINE, 15' FROM SURFACE WATER DIVERSION DITCH. (2) INSTALL LINES ON 1 CONTOUR, NO DEEPER THAN 36", 9' APART ON CENTER.

ANTLER DRIVE

INITIAL SITE SKETCH



AS BUILT SKETCH

TANK INSPECTED 3/8/94 KSH

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: [signature]

Improvement Permit by: STEVE HEDRICK date 9/21/93

Existing System Inspection by: ____ date ____

Installed by: DAVID YOUNTZ

Certificate of Completion by: STEVE HEDRICK date 3/16/94

Operation Permit by: ____ date ____

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