9A-97-A-12 on terminal

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. 17169 DATE 10/8/93 TAX MAP NO. 9A-9-A-12

OWNER OR CONTRACTOR G & G BUILDERS PHONE: Business (704) 492-7810 Home

ADDRESS RT-1, Box 327, MOCKSVILLE NC 27028

LOCATION NC 115 N, TL SCOTTS CREEK RD, TL MILLER FARM RD, TR DOE TRAIL, 12TH LOT ON (R)

SUBDIVISION DEERCROFT BLOCK / SECTION I LOT 12 LOT AREA 110 X 210 SITE CLASS PS L.T.A.R. 0.33 GPD/FT²

Water Supply: ☐ Individual ☐ Community ☑ Public

Septic Tank: 1000 Gallons; STB 358 Date 2/8/94

Pump Tank: ____ Gallons; PT ____ Date ____

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

No Lines 4 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

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

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

Garbage Disposal: ☐ Yes ☑ No

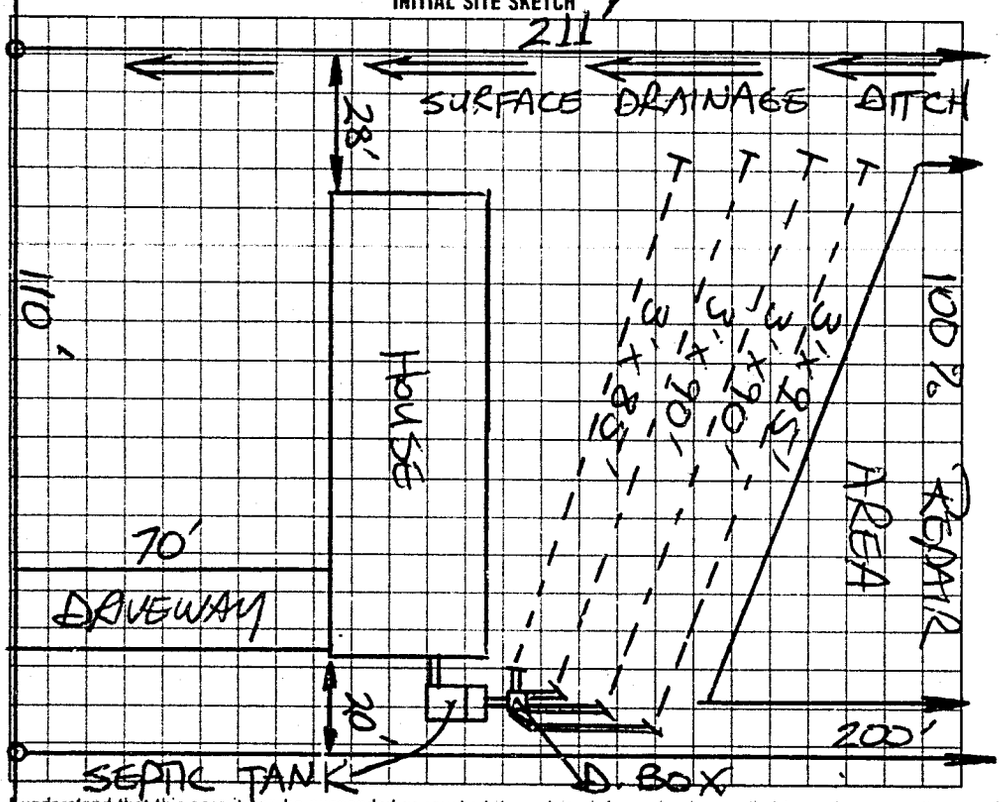
Auto. Dishwasher: ☑ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

Other ____

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

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 Mike Renfrow

Improvement Permit by: STEVE HEDRICK date 10/8/93

Existing System Inspection by: ____ date ____

Installed by: DAVID YOUNTZ

Certificate of Completion by: STEVE HEDRICK date 3/23/94

Operation Permit by: ____ date ____

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

DOE TRAIL

17000