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. 17269 DATE 10/25/93 TAX MAP NO. 14B-A-64

OWNER OR CONTRACTOR CHARLES HOSS PHONE: Business Home

ADDRESS RT. 2 BOX 402 B STATESVILLE NC 28677

LOCATION NC 115N, ON (R) JUST BEFORE COWLES FARM ROAD, MH OFF ROAD ~ 250'

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS PS L.T.A.R. EXISTING

Water Supply: ☑ Individual ☐ Community ☐ Public WELL

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields Square Feet Linear Feet EXISTING

No Lines Trench Width Trench Depth Gravel Depth

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

System Description: CONV. GRAVITY

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

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

No. Bedrooms 2 No. Bathrooms 1 No. Employees

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

Garbage Disposal: ☐ Yes ☐ No

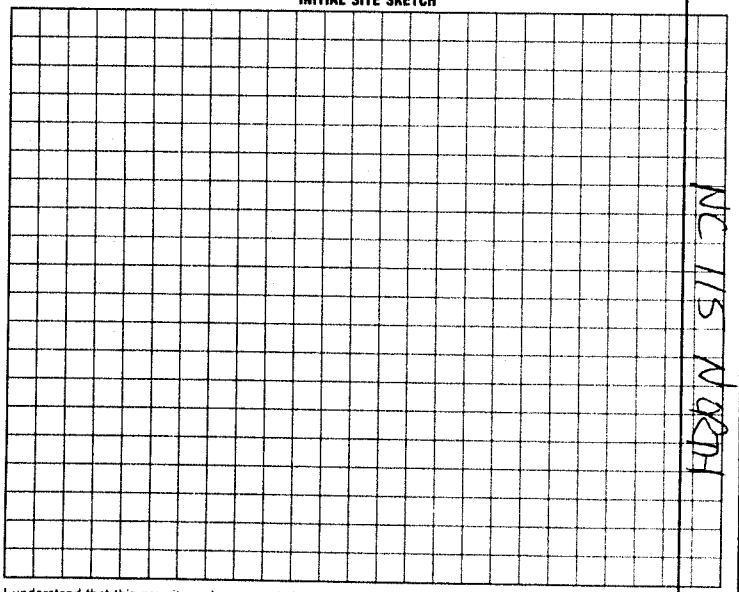
Auto. Dishwasher: ☐ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

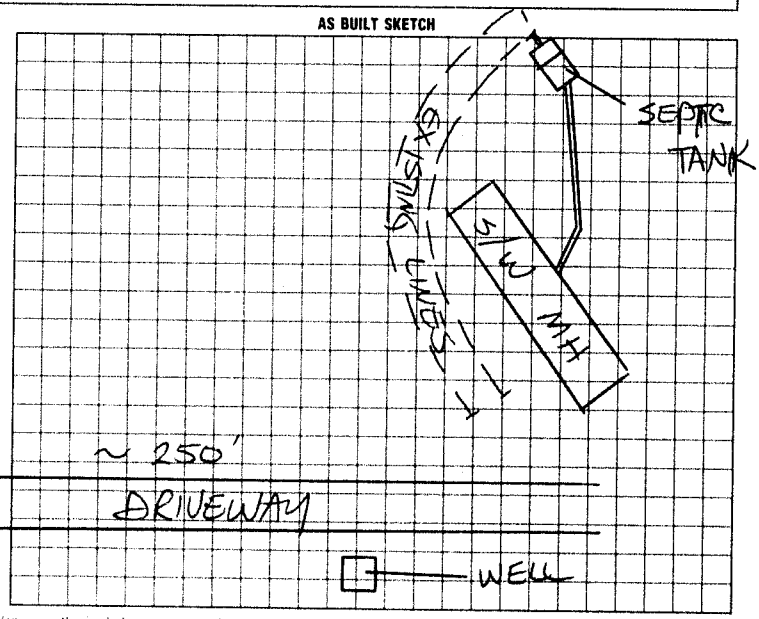
Other

Comments MH ON SITE AT TIME OF INSPECTION

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: date

Existing System Inspection by: STEVE HEDRICK date 10/25/93

Installed by

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