61894

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. 24106 DATE 7-9-96 TAX MAP NO. 14F-2-A-1 Watershed: YRA LWO

OWNER OR CONTRACTOR BARBARA B. KEY PHONE: Business Home 876-1280

ADDRESS 193 KINGSDALE DRIVE, STATESVILLE, NC 28677

LOCATION NC 115N, TL KINGSDALE DRIVE, BEAR RIGHT, 1ST DRIVE ON RIGHT

SUBDIVISION KINGSDALE BLOCK / SECTION LOT 1 LOT AREA LIMITED SITE CLASS PS DESIGN FLOW 480 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet EXISTING

No Lines EXISTING Trench Width Max Trench Bottom 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

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

☐ House/Mod. Home No. Bedrooms 4

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

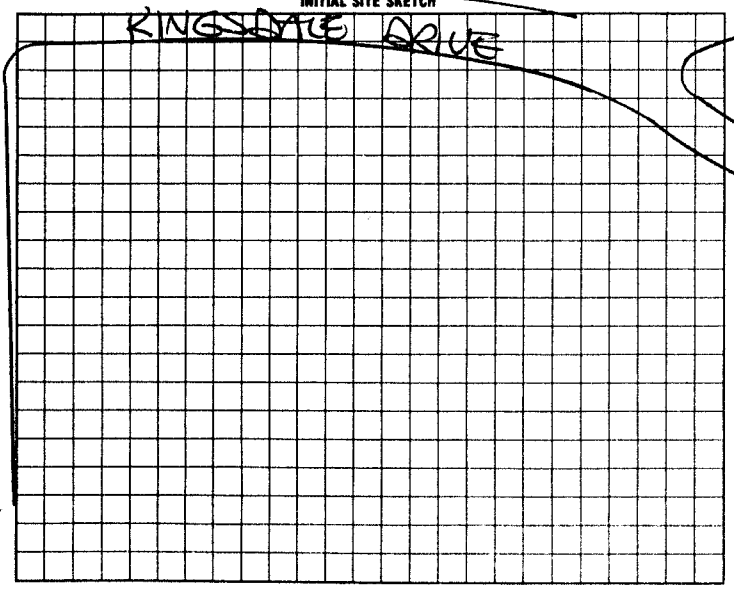
☐ Other

Water Supply:
☑ Individual
☐ Community
☐ Public
WELL

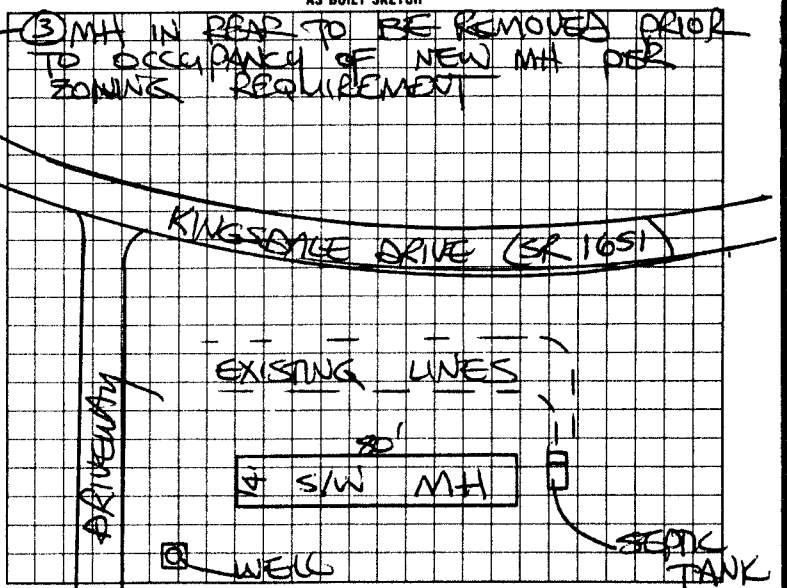
Comments:

Comments: (1) SYSTEM UNDERSIZED ACCORDING TO TAMM'S STANDARDS - HOWEVER NEW 4BR MH IS REPLACING EXISTING 4BR D/W
(2) KEEP MH MINIMUM 5' FROM SYSTEM

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

Signed:

Improvement Permit by: date

Existing System Inspection by: STEVE HEDRICK date 7-9-96

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