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. 16772 DATE 8/13/93 TAX MAP NO. 146-A-25

OWNER OR CONTRACTOR ROBERT E. REAVIS PHONE: Business Home 876-3806

ADDRESS RT. 11 BOX 336-B, STVL, NC 28677

LOCATION NC 115 N, TR FORD FARM RD, TR AT "JANE'S BEAUTY SHOP", BACK OFF ROAD ~ 600'

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.58AC SITE CLASS: PS L.T.A.R. 0.40 GPD/FT²

Water Supply: ☒ Individual ☐ Community ☐ Public WELL

Septic Tank: 1000 Gallons; STB 1012 Date 6/7/93

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 2 Trench Width 36" Trench Depth 18-30" 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 ☑ Mobile Home ☐ Business ☐ Other PLANNED FOR FUTURE SFR

No. Bedrooms 2 No. Bathrooms 2 No. Employees

Garbage Disposal: ☐ Yes ☑ No

Auto. Dishwasher: ☐ Yes ☐ No

Auto. Washing Machine: ☑ Yes ☐ No

Other

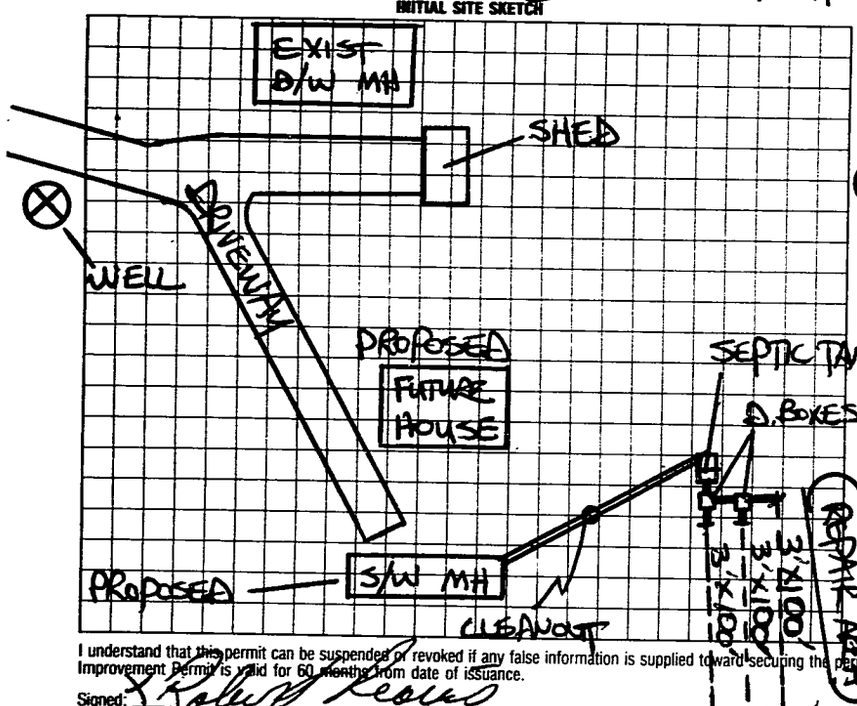
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments ① KEEP SYSTEM MINIMUM 5' FROM MH, 15' FROM FUTURE BASEMENT, 10' FROM PROPERTY LINE, 100' FROM WELL

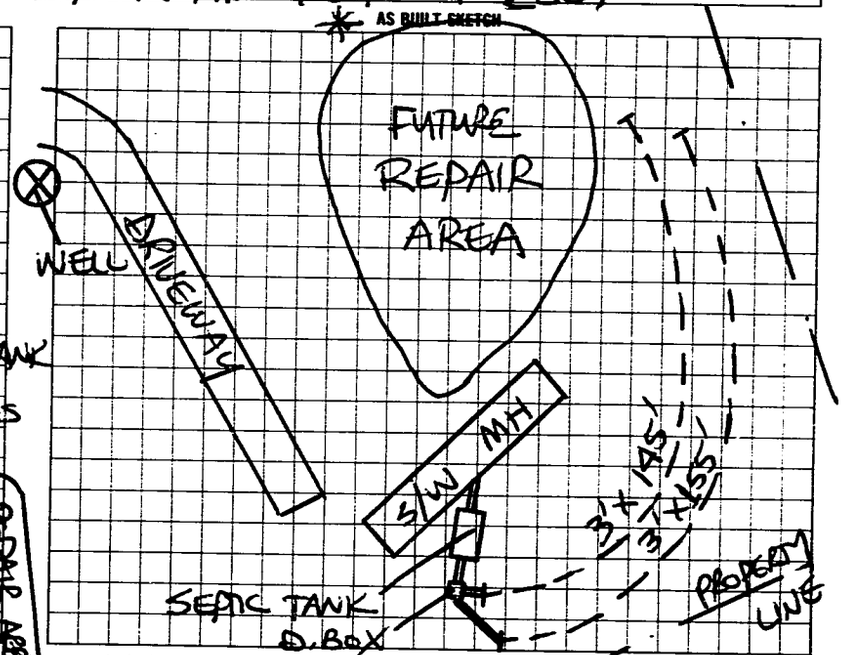
② INSTALL LINES ON CONTOUR, NO DEEPER THAN 30", 9' O.C.

③ USE CLEANOUT BETWEEN MH & S.T. IF 250'.

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: Robert Reavis

Improvement Permit by: STEVE HEDRICK date 8/13/93

Existing System Inspection by: date

Installed by: PHIL & TODD ROGERS GRADING & BACKHOE

Certificate of Completion by: STEVE HEDRICK date 8/24/93

Operation Permit by: date

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

* SYSTEM DESIGN CHANGE TO ACCOMODATE MH SITE