IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281 52535

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

PROPERTY DESCRIPTION NO. 19051 DATE 10-4-94 TAX MAP NO. 3F-13-A-7 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Thomas Haley PHONE: Business _____ Home (704) 827-5846

ADDRESS 30778 Crest Forest Rd. Farmington Hills, MI 48331

LOCATION From Troutmen take Perth Rd. TR State Park Rd. TL Honeycutt Rd. TR Bear Fox TL Captains Way Lot on R.

SUBDIVISION Capt. Cove BLOCK / SECTION _____ LOT 7 LOT AREA .51 acre SITE CLASS. [redacted] P.S. DESIGN FLOW 360 L.T.A.R. .3 gpd/ft²

Septic Tank: 1000 Gallons; STB 794 Date 12-10-94
Pump Tank: — Gallons; PT — Date —
Pump Make: — Model — Serial No. —
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 5 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Conventional, gravity fed
Repair System Description: LPP
Maintenance Agreement Required: ☐ Yes ☑ No
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

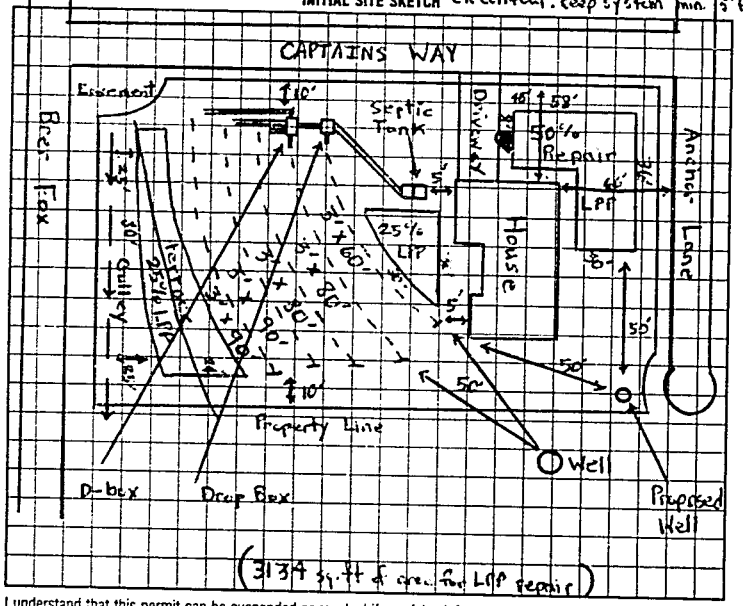
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2.5
☐ Business No. Employees ____
☐ Other

Water Supply:
☑ Individual
☐ Community
☐ Public

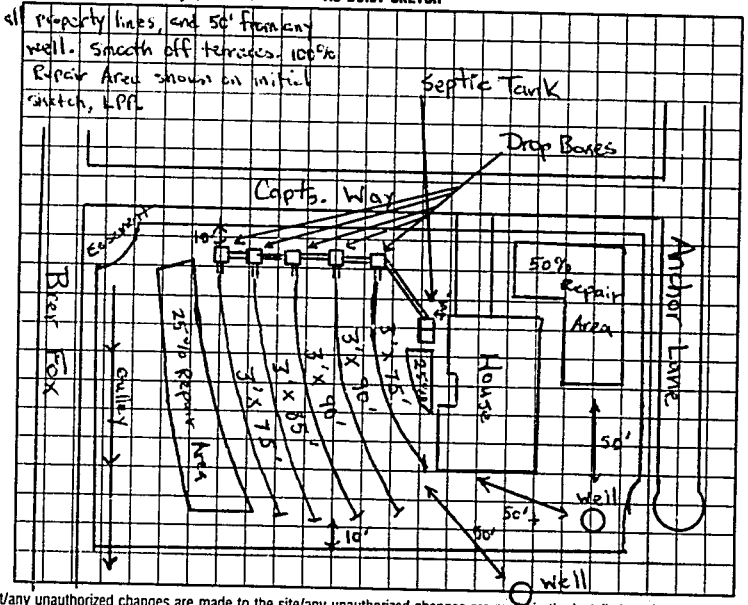
Comments: This permit voids permit issued on 7-20-94. Lay out changed to accomodate a three bedroom Home instead of a 2 Bedroom Home. Tony Jacobs proved that repair (100%) could be accomplished by LPP. INSTALL SYSTEM SHALLOW (no deeper than 24" to trench bottom) Keep lines and trenches on contour. Keep system min. 5' from Foundation of home, 10' from property lines, and 50' from any well. Smooth off terraces. 100% Repair Area shown on initial sketch, LPP.

Comments: System installed with drop boxes instead of 1 drop box and 1 D-box. 100% Repair Area in 3 places, LPP.

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: Michael J. Dennis date 10-4-94

Existing System Inspection by: _____ date _____

Installed by: Wayne Orbison

Certificate of Completion by: Michael J. Dennis date 2-21-95

Operation Permit by: _____ date _____

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