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. 22096 DATE 9-15-95 TAX MAP NO. 6B-A-64 Watershed ☐ Yes ☐ No

OWNER OR CONTRACTOR michelle Bare PHONE: Business Home 871-8379

ADDRESS BOX 75 Barium Spgs, N.C. 28010

LOCATION 21 South TL Cumberland Rd 1/4 mi on rt.

SUBDIVISION BLOCK / SECTION LOT LOT AREA 100 X 31L SITE CLASS DESIGN FLOW LTAR

Septic Tank Gallons STB Date

Pump Tank Gallons PT Date

Pump Make Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair System Type

System Description

Repair System Description

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 w/o plumbing

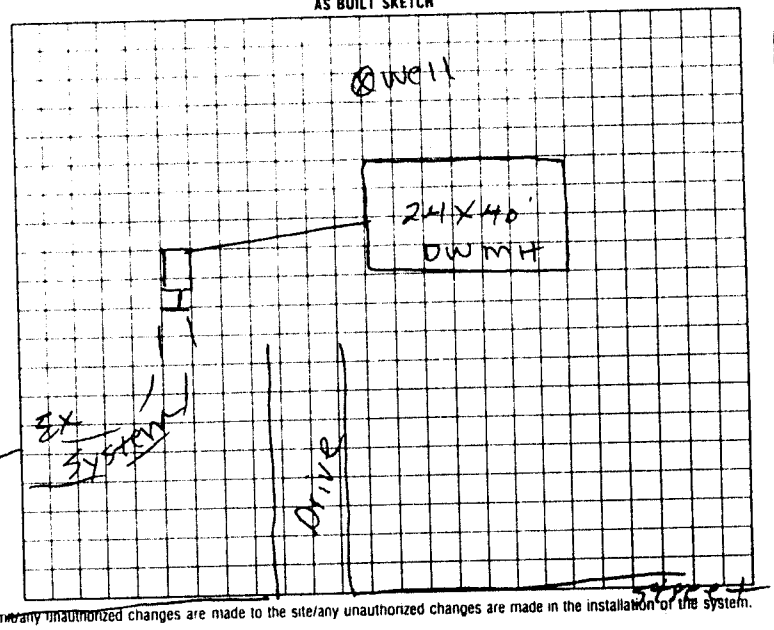
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments

Comments

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: E. C. Moore date 9-15-95

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