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. CITY DATE 11/16/93 TAX MAP NO. 6M-A-16-(43) Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR C.D. MADISON PHONE: Business 873-0521 Home

ADDRESS 1805 SAFRIET ROAD STATESVILLE NC 28677

LOCATION NC 115 N TL OLD WILKESBORO RD, TR CANDLESTICK DRIVE 2ND LOT ON (L)

SUBDIVISION CANTERBURY BLOCK / SECTION LOT 43 LOT AREA 75' x 264' SITE CLASS. PS' DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT2

Septic Tank: 1000 Gallons; STB 358 Date 10/21/93
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 36"

☒ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: CONV. GRAVITY
Repair System Description: CONV. GRAVITY / PUMP
Maintenance Agreement Required: ☐ Yes ☒ No
Gravel Depth 12" ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

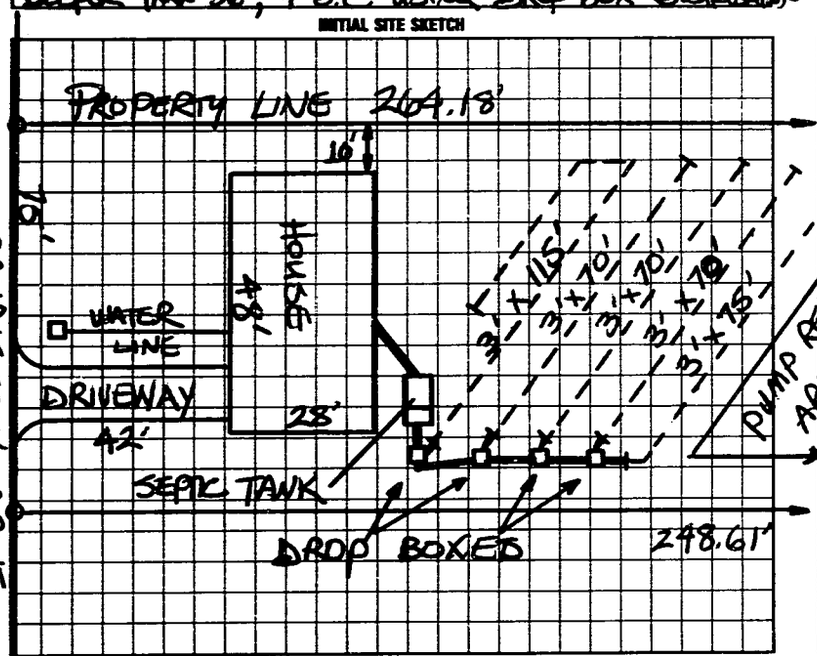
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other

Water Supply: ☐ Individual ☐ Community ☒ Public

Comments: (1) KEEP SYSTEM MINIMUM 5' FROM HOUSE, 10' FROM PROPERTY LINE (2) INSTALL TANK NO DEEPER THAN 6" FROM GROUND SURFACE (3) INSTALL LINES ON CONTOUR, NO DEEPER THAN 36", 9' O.C. USING DROP BOX DISTRIBUTION

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: STEVE HEDRICK date 11/16/93

Existing System Inspection by: date

Installed by: A-1 BACKHOE

Certificate of Completion by: STEVE HEDRICK date 12/6/93

Operation Permit by: date

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

J