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. 20490 DATE 1-15-97 TAX MAP NO. 9A-A-44 48 Pt 06 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Hope Methodist Church PHONE: Business 872-6713 Home

ADDRESS P.O. Box 5248 Statesville

LOCATION 115 N on Rt before Sullivan Rd

SUBDIVISION + LOT BLOCK / SECTION Increase Trans 7-15-97 LOT LOT AREA 14.2 acres SITE CLASS. PS DESIGN FLOW 1200 gpd Any L.T.A.R. .3

Septic Tank: 2000 Gallons; STB 0033 Date 7-25-97

Pump Tank: 2000 Gallons; PT 916 Date 7-16-97

Pump Make: Gould's Model WE0722H Serial No. H973145

Nitrification Field: No Fields 1 Square Feet 4200 Linear Feet 1400

No Lines 10 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: Pump To Conv. lines

Repair System Description: " " " "

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☐ Mobile Home ☐ Business ☑ Other Church + Daycare

No. Bedrooms ___ No. Bathrooms ___ No. Employees ___

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

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: Water Usage Study Showed 1200 gal/day Usage copy attached To permit. Use Simplex Control Panel For Pump + Alarm.

Comments:

INITIAL SITE SKETCH

See Attached Sheets

1. Sketch of Property + waste water disposal System

2. Pump Tank set up.

3. Pressure manifold set up.

$OK

AS BUILT SKETCH

See Attached Sketch

Same as shown Except Grease Trap at Kitchen and + 500 gal Change in S.T. + P.T. positions shown on 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: Paul M White

Improvement Permit by: P.C. Moore date 1-15-97

Existing System Inspection by: P.C. Moore date 1-15-97

Installed by: Ellie Younts + Sons

Certificate of Completion by: ___ date ___

Operation Permit by P.C. Moore date 9-29-97

HEALTH DEPT COPY (WHITE) INSPECTION COPY (FINAL) GREEN OWNER COPY (FINAL) YELLOW INSPECTION COPY (INITIAL) PINK OWNER COPY (INITIAL) BLUE

Inst. # Authorization to Const Expires 60 mos from Issue