IREDELL COUNTY HEALTH DEPARTMENT

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

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

~~PP125 12-11-97~~ THIS PERMIT VOIDS PREVIOUS ISSUED 7-1-97

PROPERTY DESCRIPTION NO. 25997 DATE 12-11-97 TAX MAP NO. 4738 00 6849 (PT) Watershed: ☐ PA ☐ No

OWNER OR CONTRACTOR CRAVEN, KEARNS, McDOWELL PHONE: Business _____ Home (910) 672-2269

ADDRESS P.O. BOX 2257, ASHEBORO, NC 27204

LOCATION NC 115 N, TR BRANCHWOOD ROAD, LOT ON LEFT ACROSS FROM KRUMROY LANE

SUBDIVISION RIDGECREST BLOCK / SECTION I LOT 24 LOT AREA 0.858 ACRE SITE CLASS. PS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 9-8-97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ☐ Square Feet EQ. TO 1680 Linear Feet 400± No Lines SIX Trench Width 36" Max Trench Bottom Depth 24"

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

System Description: CHAMBERED, GRAVITY

Repair System Description: CHAMBERED, PUMP

Maintenance Agreement Required: ☐ Yes ☑ No

~~Gravel~~ Depth SAND 6" ☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☐ House/Mod. Home No. Bedrooms 4

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

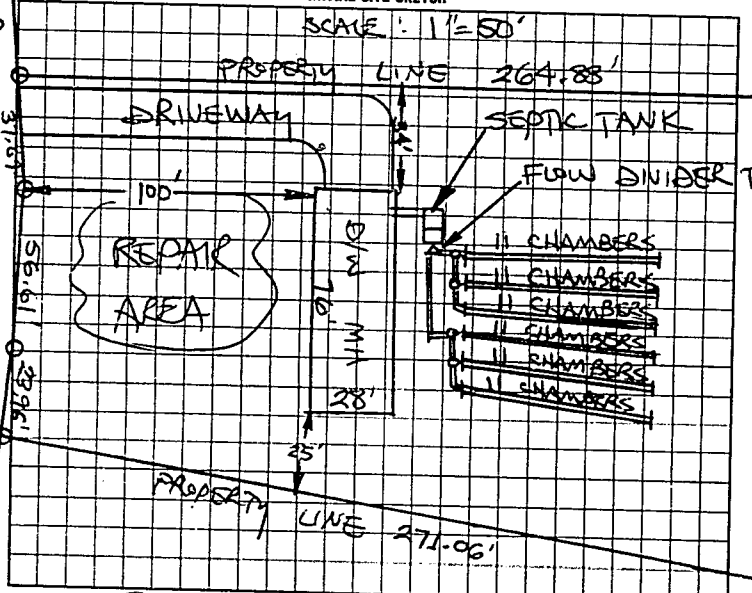
☐ Other

Water Supply: ☐ Individual ☐ Community ☑ Public

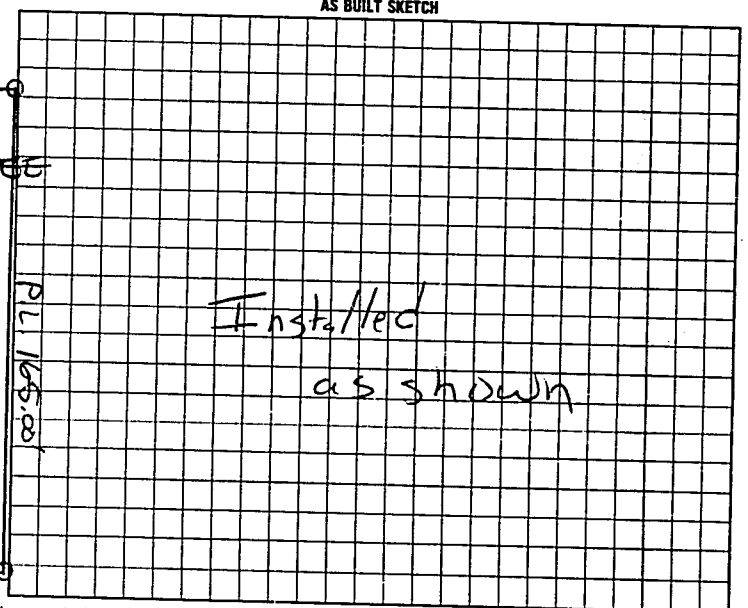
Comments: ① INSTALL SIXTY-SIX CHAMBERS IN SIX EQUAL LENGTH LINES AS FLAGGED ON-SITE ② USE ONE FLOW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO SETS OF DROP BOXES FEEDING THREE LINES,

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. Improvement Permit is valid for 60 months from date of issuance. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: _____

Improvement Permit by: STEVE HEDRICK date 12-11-97

~~Site/system~~ WITH TO CONST. ~~for~~ ~~section~~ by STEVE HEDRICK date 12-11-97

Installed by: A-1 Backhoe

~~Certificate of Completion~~ by: _____ date _____

Operation Permit by: Mark Cox RS date 12-12-97

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