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. 24339-070143 DATE 7-26-96 TAX MAP NO. 13E-1-A-59 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR THOMAS BEATTY PHONE: Business Home 878-2244

ADDRESS 1163 OLD MTN RD STVL, NC 28677

LOCATION S. CHIPLEY FORD, TL RIVER RUN RD, TL BRAMBLEWOOD DRIVE, AT END ON RIGHT

SUBDIVISION RIVER RUN BLOCK / SECTION II LOT 59 LOT AREA AMPLE SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.40 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 11-17-97

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 18-36" Gravel Depth 12"

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

System Description: CONV. GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

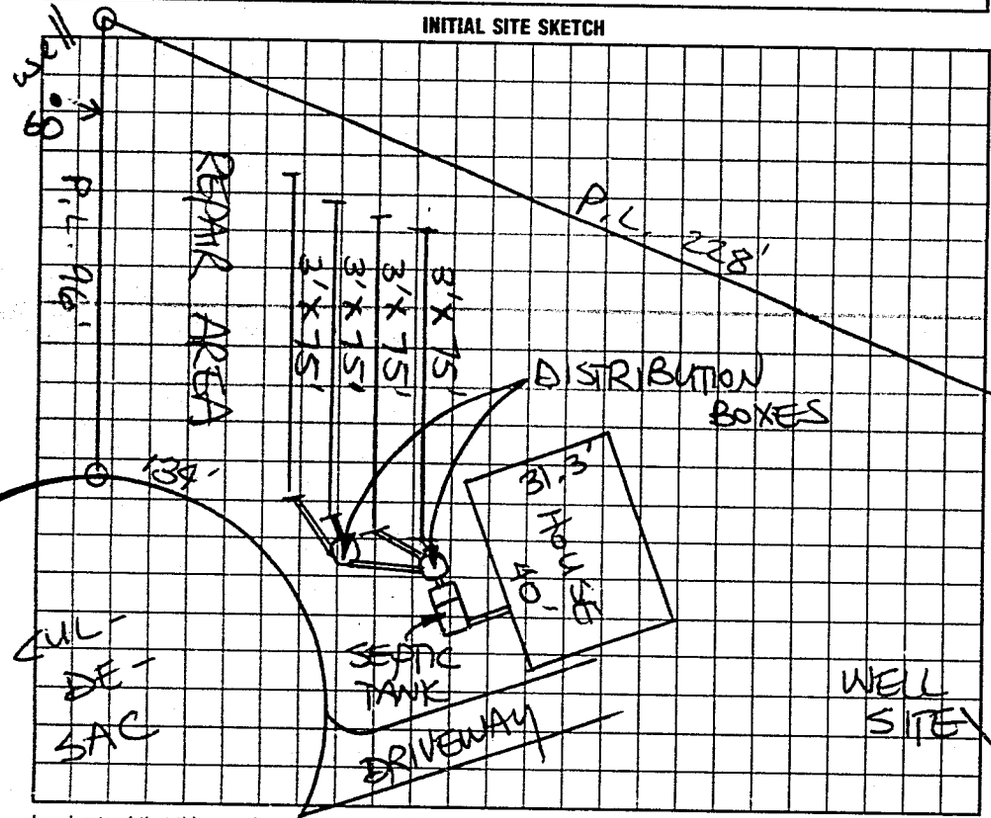
☑ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public WELL

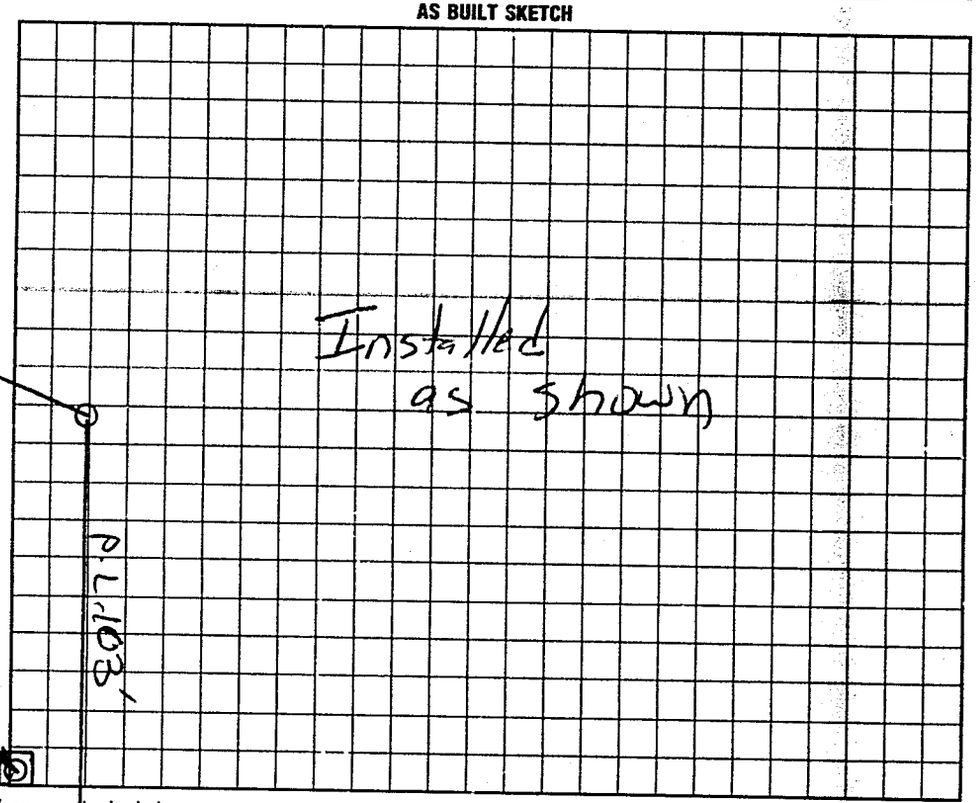
Comments: KEEP WELL MINIMUM 100' FROM SYSTEM

Comments: * Initial system has been changed to Chamber 300 ft

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.

AUTH. TO CONST. IS VALID FOR FIVE (5) YEARS FROM DATE OF ISSUANCE. IMPROVEMENT PERMIT W/ SITE PLAN IS VALID FOR FIVE YEARS

Signed: ____

Improvement Permit by: STEVE HEDRICK date 7-26-96

AUTH. TO CONST.

Existing System Inspection by: STEVE HEDRICK date 7-26-96

BEAMBLEWOOD DR.

Installed by: Arnie Duncan

Certificate of Completion by: ____ date ____

Operation Permit by: [signature] PS date 3-11-98

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