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. Town of Troutman DATE 9-7-93 TAX MAP NO. 3-H-3

OWNER OR CONTRACTOR Jim D. Jones PHONE: Business Home 528-4245

ADDRESS

LOCATION Hwy 215 thru Troutman TR Autumn Leaf Rd. lot ≈1 mile on R across from Trellis Lane

SUBDIVISION Wagner Heights BLOCK / SECTION LOT 17 & 18 LOT AREA .75 acre SITE CLASS. P.S. L.T.A.R. .3 gpd/ft2

Water Supply: ☑ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 350 Date 7-30-93

Pump Tank: — Gallons; PT — Date —

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'

No Lines 4 Trench Width 36" Trench Depth 36" Gravel Depth 12"

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

System Description: Conventional, gravity

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3 Garbage Disposal: ☐ Yes ☑ No

☐ Mobile Home No. Bathrooms 2 Auto. Dishwasher: ☑ Yes ☐ No

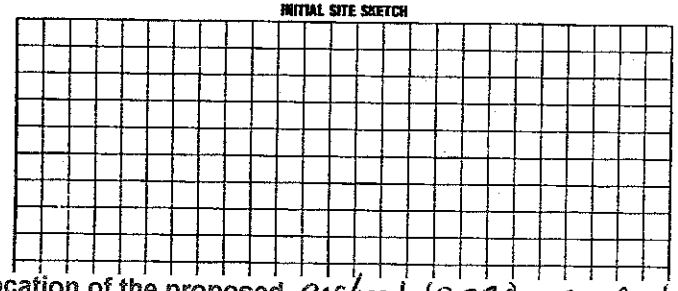
☐ Business No. Employees — Auto. Washing Machine: ☑ Yes ☐ No

☐ Other Other

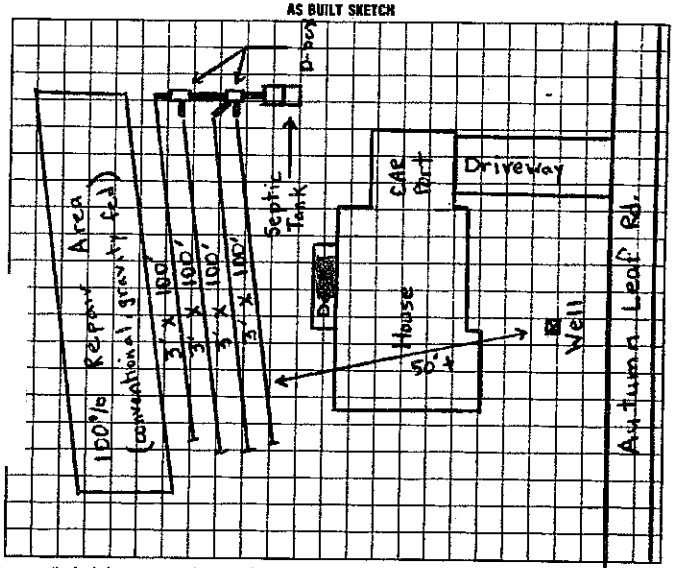
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments Nitrification Lines left uncovered during several periods of hard rain. This may decrease life-span of system. Dug into ends of lines and drained water off. 100% Repair Area below system, conventional, gravity fed.

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed enclosed 10x20 sun porch addition does not appear to impact the existing on-site septic system.**NOTE:

REHS

Date: 12-7-11

ICHD-Environmental Health Division

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: Michael P. Dennis date 3-22-93

Existing System Inspection by: date

Installed by: Richard Abernathy

Certificate of Completion by: Michael P. Dennis date 9/ /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