IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281 59349

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

PROPERTY DESCRIPTION NO. 22107 DATE 9-15-95 TAX MAP NO. 46-1-A 20, 21 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Rose M. Goodman PHONE: Business Home 528-5834

ADDRESS Lon Lake Cr. Troutman N.C.

LOCATION 215 TL Perry Rd TR Trout Mn 1/2 way on Rt.

SUBDIVISION Perry Heights BLOCK / SECTION LOT 20 & 21 LOT AREA 1.6 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 1012 Date 4-17-96
Pump Tank Gallons; PT Date
Pump Make. Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1045 Linear Feet 345
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III, IV, V, VI
System Description: Conv. Gravity
Repair System Description: Pump To Conv.
Maintenance Agreement Required: ☐ Yes ☐ No

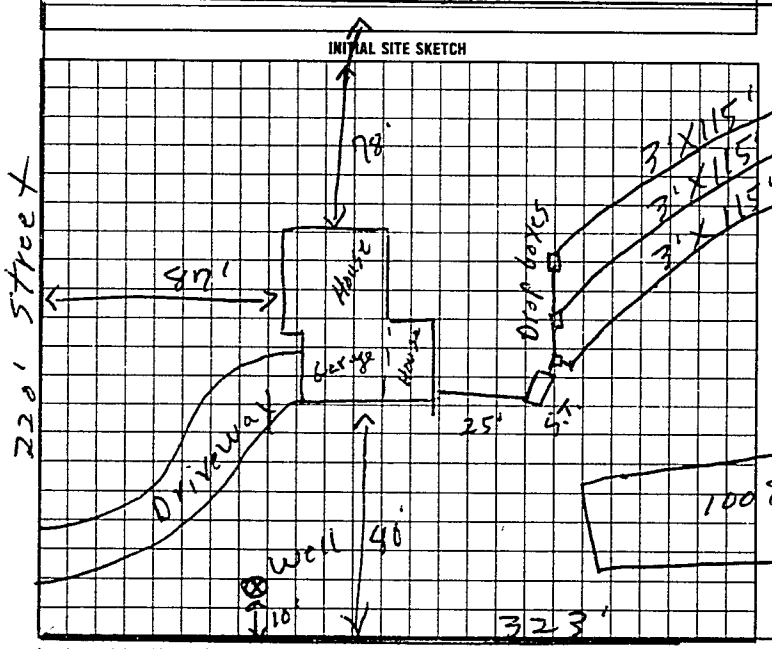
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

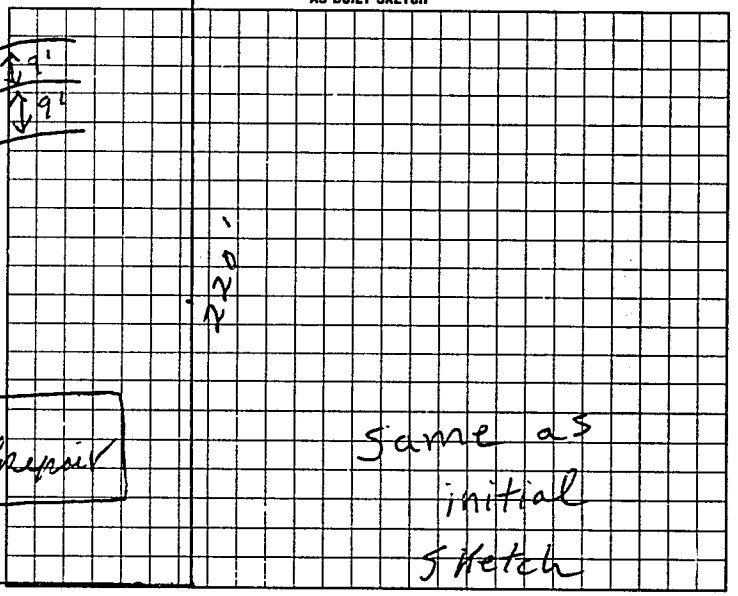
Comments:

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.

Signed: x Rose M. Goodman

Improvement Permit by: R. C. Moore date 9-15-95

Existing System Inspection by: date

Installed by: B. Sigmon Const.

Certificate of Completion by: date

Operation Permit by: R. C. Moore date 7-9-96

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