not on terminal

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281 49933

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

PROPERTY DESCRIPTION 17645 DATE 1-3-94 TAX MAP NO 4<-9-56 Witnessed Yes No

OWNER OR CONTRACTOR Kenny Stone PHONE Business Home 873-483-4387

ADDRESS Rt 1 Box 105-45 Denver N.C.

LOCATION US 21 N marked Rt on Treatman TR Hoover Rd 1.25 mi on left

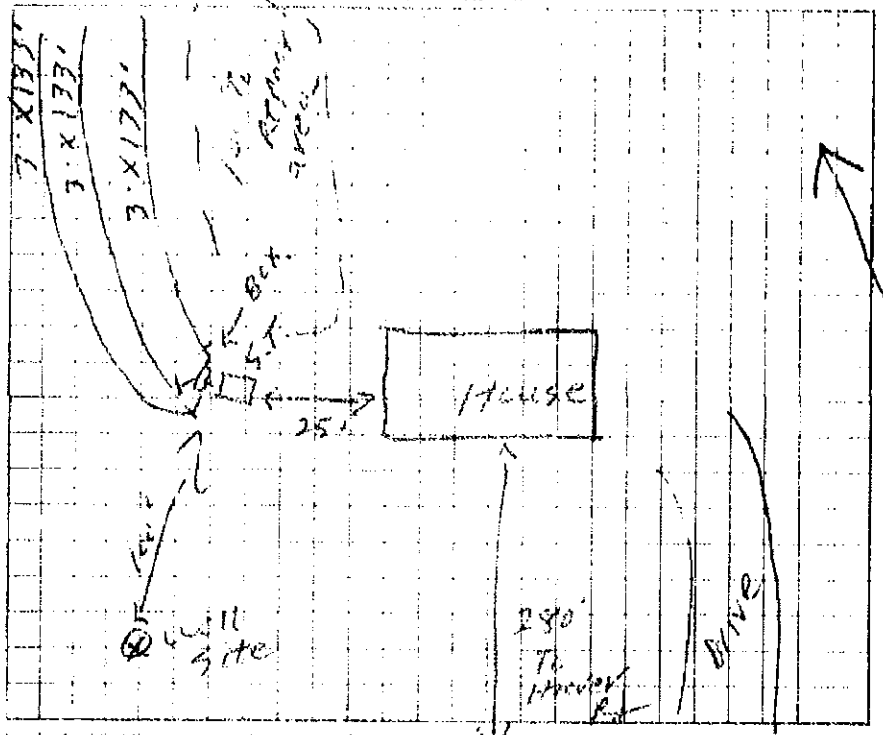
SUBDIVISION LOT LOT AREA 2.609 acres SOIL CLASS 5 DESIGN FLOW 300 LTAR .3

Soil Type 1		Date	New System	Repair System Type (1) (2) (3) A V	House/Mod Home	No Bedrooms 3	Water Supply
Perc Test	Minutes	Date	System Description	Conv. Gravity Pump	Mobile Home	No Bathrooms 3	Individual
Perc Hole	Hole	Test No	Repair System Description		Business	No Employees	Community
No Rock	Depth	Linear Feet 400	Maintenance Agreement Required Yes No		Other		Public
No Low 3	Depth 36"	Bottom Depth 36"	Gravel Depth 12"	Slab Crawl Space Basement w/plumbing		Basement w/o plumbing	

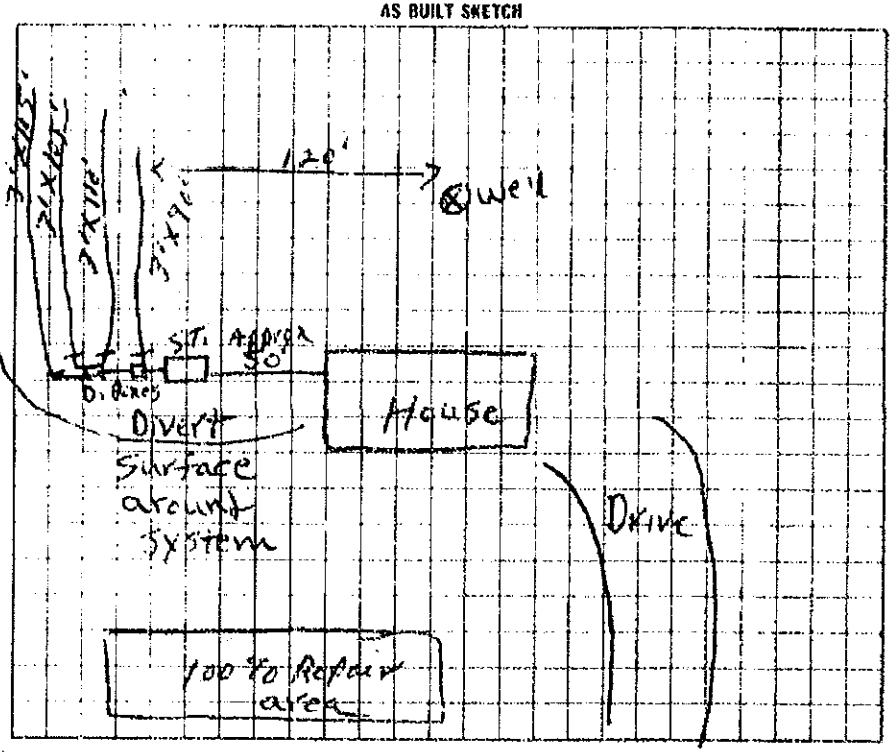
Comments

Comments well location switched by home owner therefore repair area moved to front

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

Signed K Kenny Stone

Improvement Permit by E. C. Moore date 1-3-94

Existing System Inspection by date

Installed by James Hunter

Certificate of Completion by E. C. Moore date 7-20-94

Operation Permit by date

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

JAN. 1, 1989 18:41