12:00

55876

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. 21102 DATE 5-12-95 TAX MAP NO. 10 C-2-E-32 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Louise N. Huston PHONE: Business Home 873-4689

ADDRESS 151 Nicholson Way Statesville

LOCATION US 21 North TL S Ft Dobbs Rd 1/4 mi RR Left corner Nicholsonway

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.3 acres SITE CLASS. DS DESIGN FLOW 360 L.T.A.R. 1.35

Septic Tank: 1000 Gallons; STB 794 Date 3-31-95

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 4 Square Feet 1035 Linear Feet 345

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

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

System Description: Conv. Gravity

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

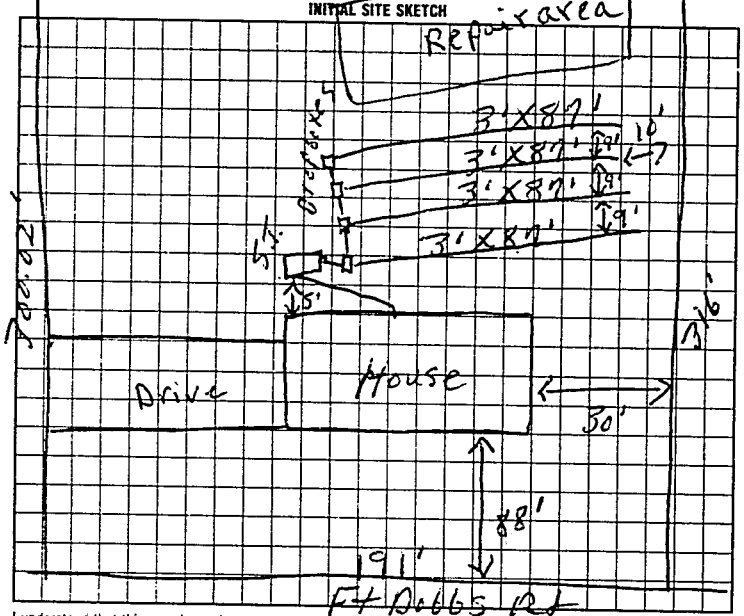
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

191'

INITIAL SITE SKETCH



Comments:

AS BUILT SKETCH

Same as initial 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: X

Improvement Permit by: J. C. Moore date 5-12-95

Existing System Inspection by: date

Installed by: A-1 Backhoe

Certificate of Completion by: J. C. Moore date 9-20-95

Operation Permit by: date

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