IREDELL COUNTY HEALTH DEPARTMENT

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

49355

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

PROPERTY DESCRIPTION NO. 17156 DATE 10-15-93 TAX MAP NO. 6610 F-A-14 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR William D. Hauser PHONE: Business _____ Home 876-2323

ADDRESS Rt 5 Box 93 Stat

LOCATION R1N TL Jennings Rd Past I-77 1/8 mi on left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 6+ acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 1012 Date 9-8-93

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345

No Lines 3 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: " "

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

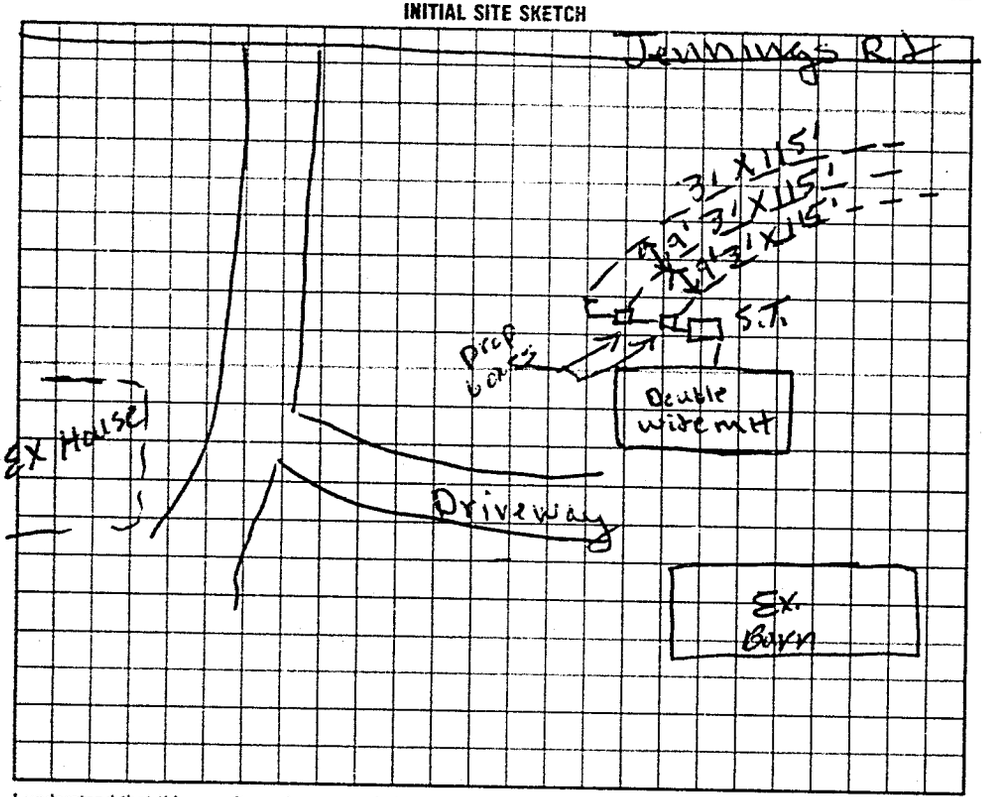
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

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 W.D. Hauser

Improvement Permit by: L. C. moore date 10-15-93

Existing System Inspection by: _____ date _____

Installed by: James Hutler

Certificate of Completion by: L. C. moore date 1-11-94

Operation Permit by: _____ date _____

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