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. 17385 DATE 11-4-93 TAX MAP NO. 106-A-90 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Howard Forrester PHONE: Business Home 878-2229

ADDRESS Rt 8 Box 243 Sta

LOCATION US 21 N TL Jennings Rd 1/2mi TL Attie Lane 1/4mi on RT

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1 acre SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 135

Septic Tank: 1000 Gallons; STB 1012 Date 10-93

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 745

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: " "

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

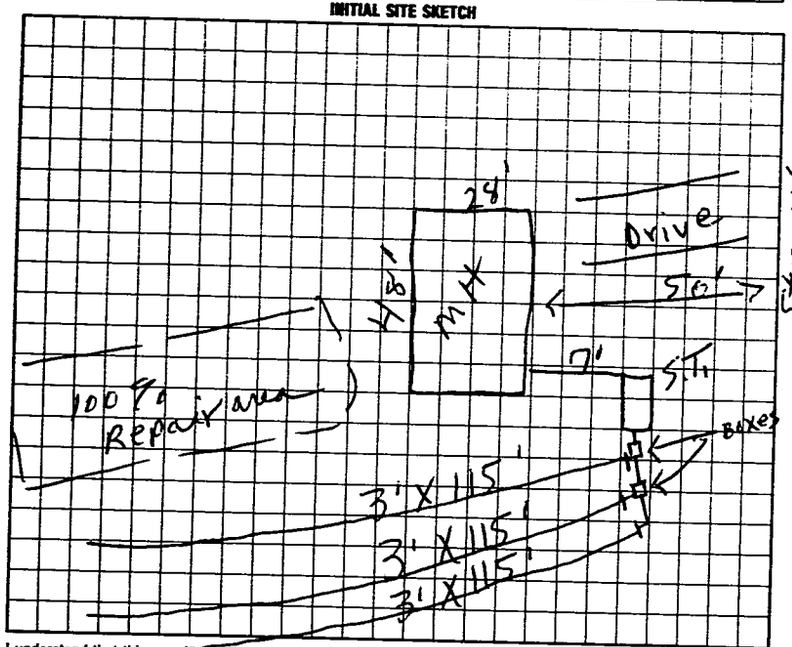
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

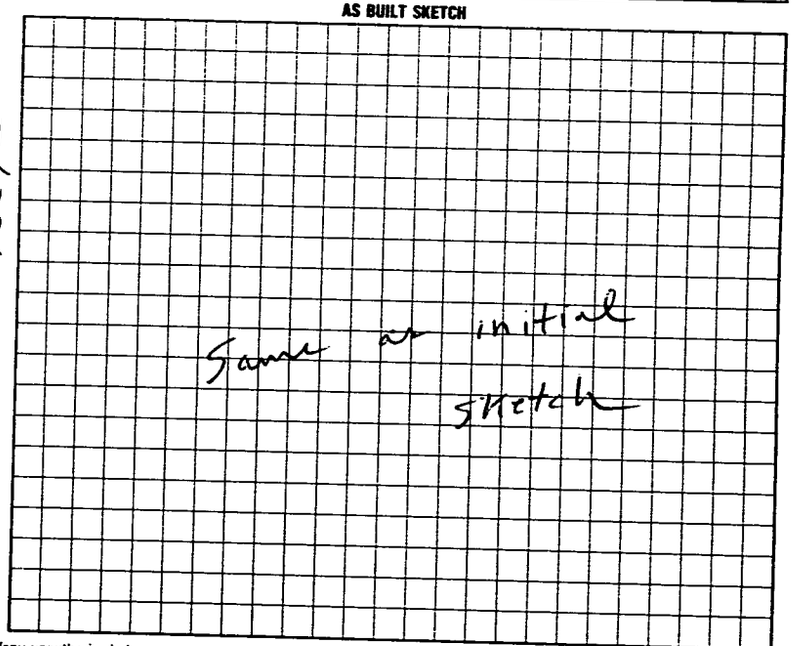
Comments: Run drain lines on contour of slope

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. Improvement Permit is valid for 60 months from date of issuance.

Signed: X. Alicia Forrester daughter

Improvement Permit by: L.C. moore R.S. date 11-4-93

Existing System Inspection by: date

Installed by: Forest Shuford

Certificate of Completion by: L.C. moore date 12-1-93

Operation Permit by: date

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