IREDELL COUNTY HEALTH DEPARTMENT

~~6695~~ ~~5443~~ ~~22876~~ #60175

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

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

PROPERTY DESCRIPTION NO. 22876 DATE 1-3-96 TAX MAP NO. 10K-1-A-28 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Jack Borders PHONE: Business _____ Home 881-0025

ADDRESS 188 Knox Fm Rd

LOCATION 21N To Jennings Rd TR Reeves Rd TL millstone Drive 1/8mi lot Rt

SUBDIVISION Amblesite BLOCK / SECTION _____ LOT 28 LOT AREA 110'X200' SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 135

Septic Tank: 1000 Gallons; STB 1012 Date 9-11-96

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1050 Linear Feet 350

No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I ⓘ III IV V VI

System Description: Conv. Gravity

Repair System Description: Pump To Conv. Lines

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees ____

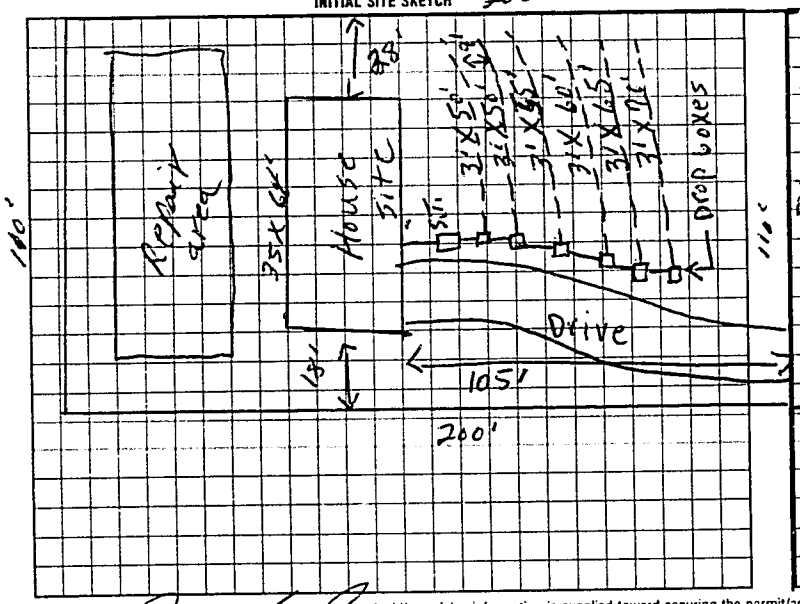
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

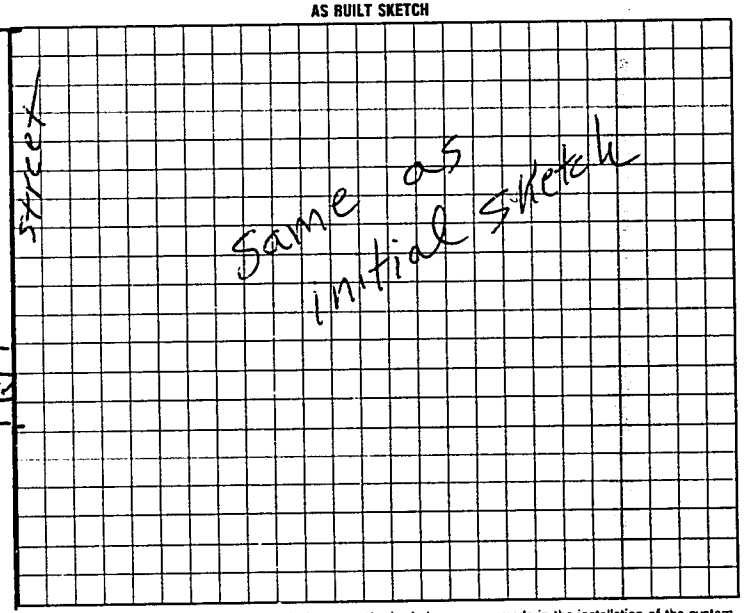
Comments:

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 _____

Improvement Permit by: R.C. moore date 1-3-95

Authorization to const by R.C. moore date 1-3-95

Installed by: Dale Fox Alex. Co.

Certificate of Completion by: _____ date _____

Operation Permit by R.C. moore date 10-25-96

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

Authorization to const Expires 60 mos. from issue date

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