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. 16992 DATE 3/28/94 TAX MAP NO. 4G-4-A-57 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR MEL GRAHAM (PHESANT RUN) ~~PHONE: Business~~ 650-99-2195 Home

ADDRESS 7707 PARK RD CHARLOTTE, NC.

LOCATION SINGLE OAK DR, WEATHERSCRK OFF SHINNVILLE TL SINGLEOAK, ON (R) BEFORE CORNER LOT

SUBDIVISION PHESANT RUN BLOCK / SECTION 2 LOT 57 LOT AREA ~.65AC SITE CLASS. P DESIGN FLOW 360 L.T.A.R. (.215) .25-.3

Septic Tank: 1000 ✓ Gallons; STB 825 Date 4-19-94

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 1309 Linear Feet ~~436-450~~

No Lines 5 Trench Width 3' Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: GRAVITY - CENJ.

Repair System Description: SAME

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

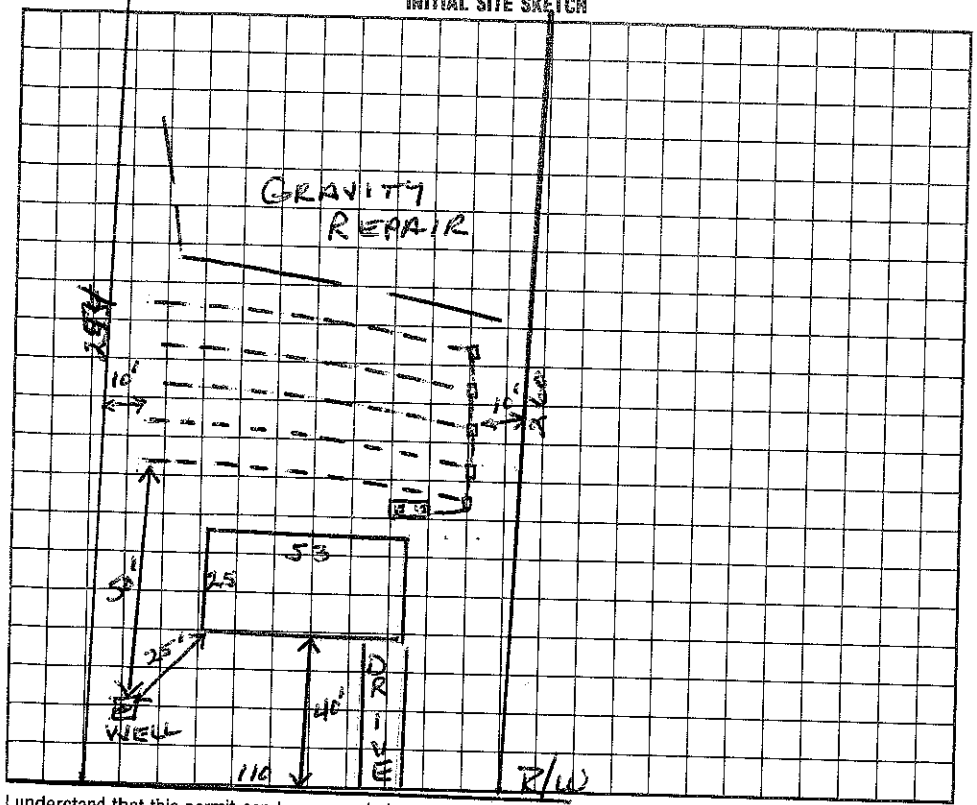
Water Supply: ☑ Individual ☐ Community ☐ Public

Comments:

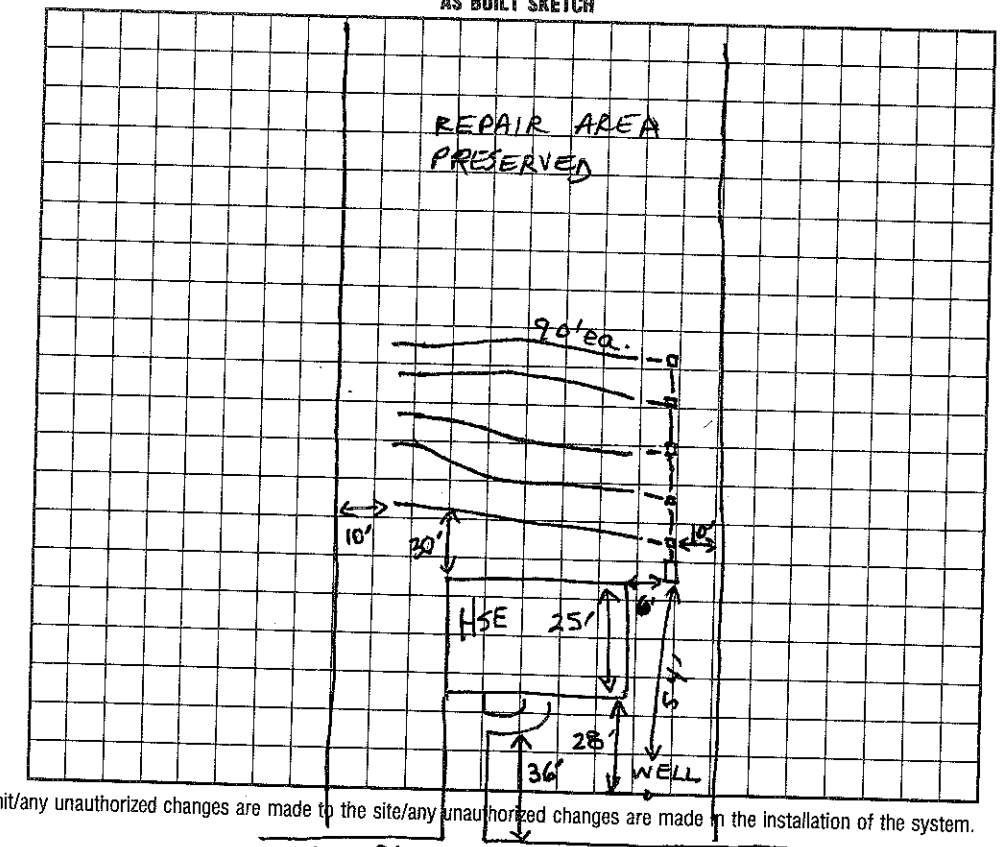
TRENCH DEPTH 30" MAX. - FOLLOW CONTOURS

Comments: DITCH DEPTH RANGES FROM 24" TO 34" DEPENDING ON MICROCONTOUR — OVERALL OK. DROP BOX OUTLETS + INLETS - LEVEL + SEALOK. TANK SEALOK DITCH SEPARATION GOOD, 6'+.

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: Daniel P. Fisher Jr. SINGLE OAK DR.

Improvement Permit by: Wendy Parker R.S. date 3/28/94

Existing System Inspection by: _____ date _____

Installed by: GEORGE KIRKPATRICK/ROWAN SEPTIC TANK

Certificate of Completion by: Andrea Lemon date 7-11-94

Operation Permit by: _____ date _____

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