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. 18069 DATE 3-22-94 TAX MAP NO. 4L-A-55A Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR William J. Squailia PHONE: Business Home 873-1755

ADDRESS R+7 BOX 643 STA 28677

LOCATION I-77 S TL Amity Hill TR mountaineer Dr. TR Dusty Loop 1/4 mi RT

SUBDIVISION Dan Smith Est. BLOCK / SECTION D LOT 29 LOT AREA 1.50 acres SITE CLASS. P.S. DESIGN FLOW 240 L.T.A.R. .13

Septic Tank: 1000 Gallons; STB 794 Date 4-15-94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 267

No Lines 3 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, ☒ III, IV, V, VI

System Description: Conv Gravity

Repair System Description: Porus Block Repair

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 2

☒ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other

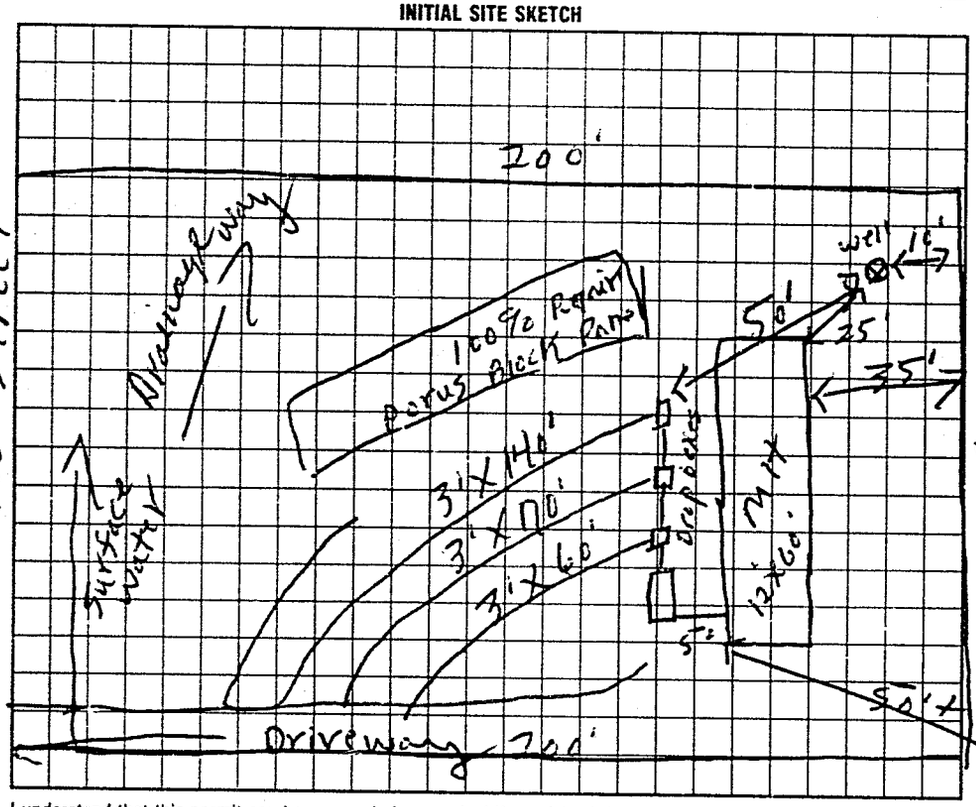
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

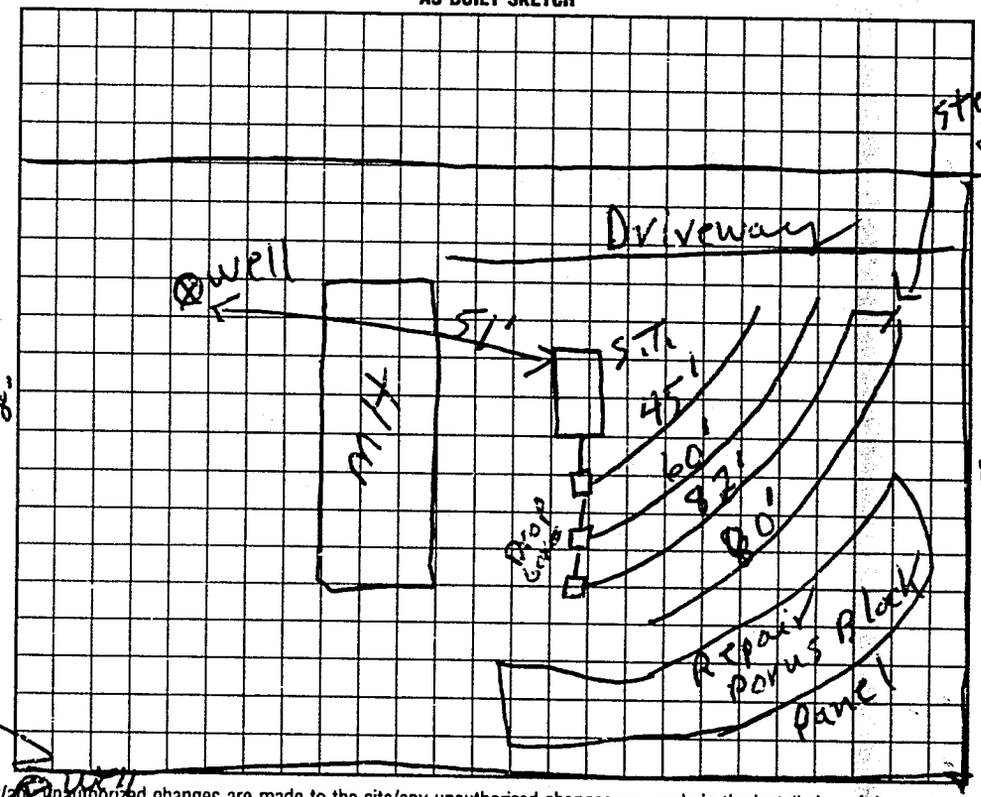
Comments: Grade yard so that surface water will run to front + down road ditch

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 William J Squailia Jr

Improvement Permit by: F. C. Moore date 3-22-94

Existing System Inspection by: date

Installed by: A-1 Backhoe

Certificate of Completion by: F. C. Moore date 5-20-94

Operation Permit by: date

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