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. 16054 DATE 7-23-93 TAX MAP NO. 4L-B-40

OWNER OR CONTRACTOR Glenn E. Ramsey PHONE: Business Home

ADDRESS

LOCATION I-77 South TL Amity Hill Rd TR pitch Rd before Hatchery on left

SUBDIVISION BLOCK / SECTION LOT LOT AREA 2 acres SITE CLASS. P.S. L.T.A.R. .35

Water Supply: ☒ Individual ☐ Community ☐ Public

Septic Tank: 1000 Gallons; STB 1012 Date 5-3-93

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360

No Lines 4 Trench Width 36 Trench Depth 18 to 36 Gravel Depth 12 to 18

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

System Description: Conv. Gravity

Repair System Description: 11 pump

Maintenance Agreement Required: ☐ Yes ☐ No

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

No. Bedrooms 3 No. Bathrooms 1 No. Employees

Garbage Disposal: ☐ Yes ☒ No

Auto. Dishwasher: ☐ Yes ☒ No

Auto. Washing Machine: ☒ Yes ☐ No

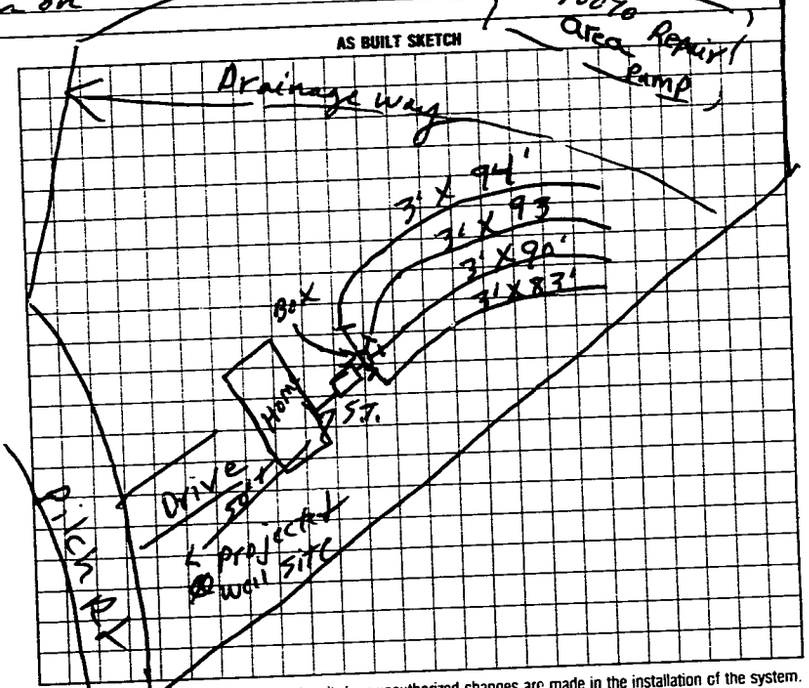
Other

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

Comments well not located at time of this inspection locate as shown on sketch

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: date

Improvement Permit by: date

Existing System Inspection by:

Installed by: Forest Shuford

Certificate of Completion by: J. C. Moore date 7-23-93

Operation Permit by: date

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