pd. 175 8-25-97

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. 067666 DATE 8-16-97 TAX MAP NO. 4751498106 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Integrity Homes PHONE: Business 528-3320 Home

ADDRESS 4945 Main St Troutman NC

LOCATION 77S E. 45 T/L Amity Hill TR Pilot 1st D/W on (R)

SUBDIVISION Eagle Welling BLOCK / SECTION LOT 4 LOT AREA SITE CLASS P/S DESIGN FLOW L.T.A.R. 0.35

Septic Tank: 1000 Each Gallons: STB Date

Pump Tank: 2 Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet Linear Feet 115

No Lines 1 Trench Width 36in Max Trench Bottom Depth 36in Gravel Depth 12

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

System Description: Gravity Conventional

Repair System Description: Pump Panels/~~Pump~~

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 4

☒ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

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

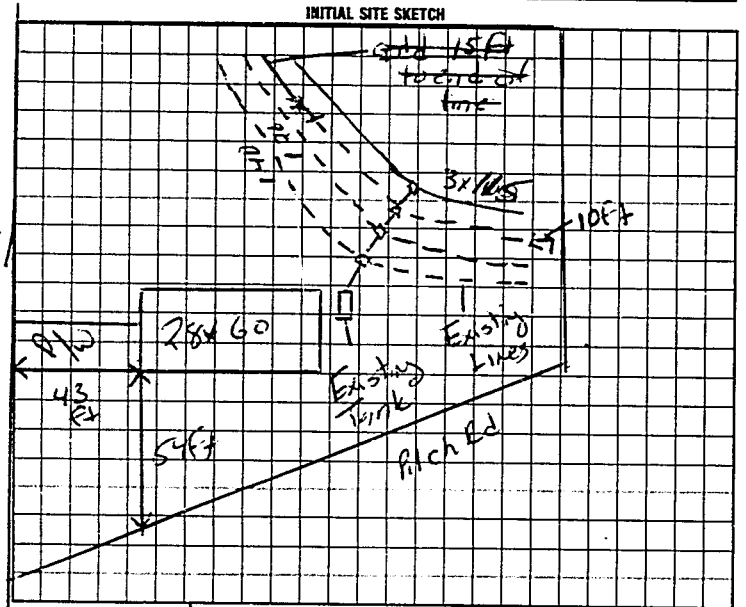
Water Supply: ☒ Individual ☐ Community ☐ Public

Comments:

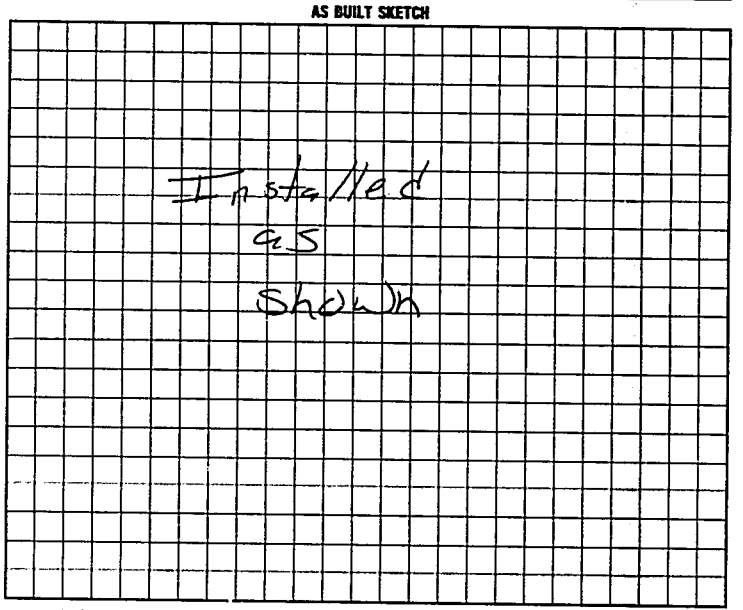
Changed from 3Bd to 4Bd after initial system was installed

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:

Improvement Permit by: Mark C. Ostrosky RS date 8-19-97

Existing System Inspection by: Mark C. Ostrosky RS date 8-19-97

Installed by:

Certificate of Completion by: date

Operation Permit by: Mark C Ostrosky RS date 8-29-97

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

07 Σ 100