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. _____ DATE 8-27-96 TAX MAP NO. _____ Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Mary Beth Edmiston PHONE: Business _____ Home 873 9154

ADDRESS 351 Amity Hill Rd

LOCATION I-77 TL Amity Hill Rd past Shiloh Rd 1/4 mi left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA acreage SITE CLASS. V5 DESIGN FLOW 360 L.T.A.R. 13

Septic Tank: Ex. Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: _____

Repair System Description: Gravity Chambers

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☑ Other _____

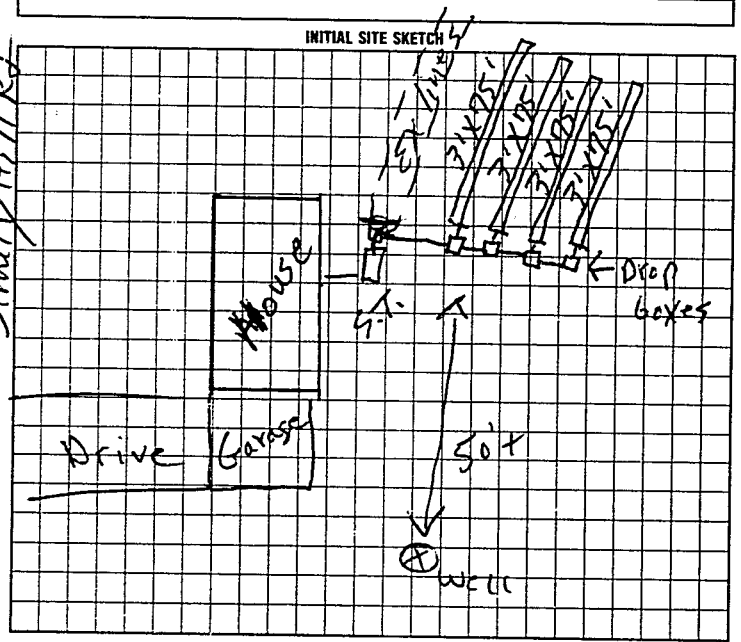
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

Comments: Repair all plumbing leaks

Comments: Old lines were not used Too much sinkage to be usable

INITIAL SITE SKETCH



AS BUILT SKETCH

Same as initial 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 Mary Beth Edmiston

Improvement Permit by: R.C. Moore date 8-27-96

Authorization to Install Existing System Inspection by: R.C. Moore date 8-27-96

Installed by: Larry Beam

Certificate of Completion by: _____ date _____

Operation Permit by: R.C. Moore date 9-20-96

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

Authorization to Count. EXPIRES 60MOS from issue