IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 7[illegible]

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SY[illegible]TEM I[illegible]

PROPERTY DESCRIPTION NO. _____ DATE 7-19-95 TAX MAP NO. _____

OWNER OR CONTRACTOR Toney morrison PHONE: Business _____ Home 87[illegible] Wate[illegible]-173

ADDRESS 131 Steeple Lane

LOCATION NoE TR Shiloh Ch Rd TL Clemmons TL creatiview TR Steeple L[illegible] a 1st [illegible]

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. _____ DESIGN FLOW _____ T.A.R. _____

Septic Tank 1000 Gallons: STB 1012 Date 8-5-95 | ☑ New System ☐ Repair System Type: I ☐ II, IV, V, VI | ☐ House/Mod. Home No Bedrooms [illegible]

Pump Tank _____ Gallons: PT _____ Date _____ | System Description: _____ | ☑ Mobile Home No Bathrooms [illegible]

Pump Make: _____ Model _____ Serial No _____ | Repair System Description: Conv. Gravity | ☐ Business No Employees _____

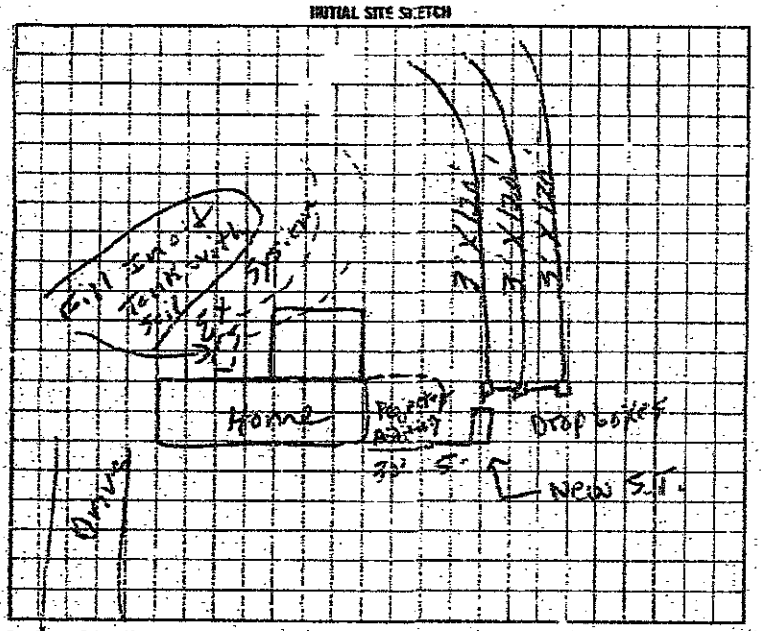
Notification Field: No Fields 1 Square Feet 1080 Linear Feet 360 | Maintenance Agreement Required: ☐ Yes ☐ No | ☐ Other _____

No Lines 3 Trench Width 36" Max Trench Bottom Depth 32" Gravel Depth 12" | ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Base[illegible]mt w/plumb

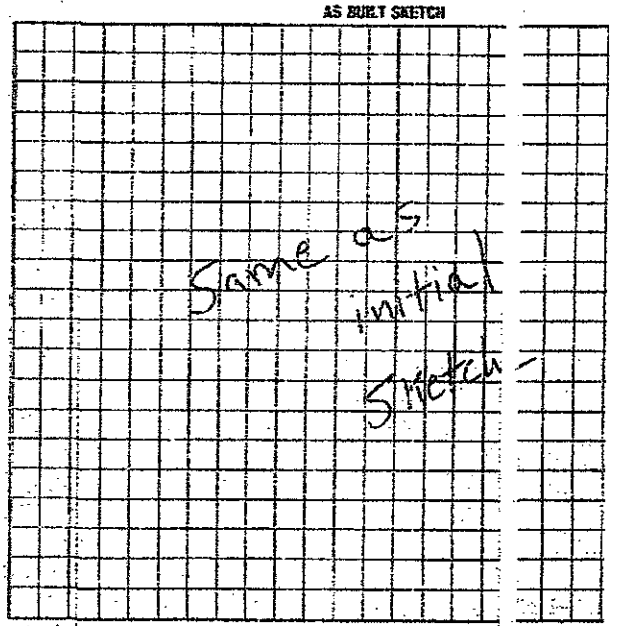
Comments: Repair by adding new system to existing septic system

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 this site/any unauthorized changes are[illegible]ade in the ins[illegible]

Signed: X Vicki Moore

Improvement Permit by: P. C. Moore date 9-19-95

Existing System Inspection by: _____ date _____

Installed by: Donald Lackey

Certificate of Completion by: _____

Operation Permit by: P. C. Moore

HEALTH DEPT. COPY: WHITE INSPECTION COPY (FINAL): GREEN OWNER COPY (FINAL): YELLOW INSPECTION COPY (INITIAL): PINK OWN[illegible] COPY: (INITIA[illegible]

The proposed Room additions addition does not appear to impact the existing septic system.

**NOTE: Still have 3 Bedrooms - 2 Bathrooms

R.S.

Date: 5-8-09

ICHD-Environmental Health Division

JAN. 8, 1989 21:16