IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

635?9

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 23885 DATE June 15, 1996 TAX MAP NO. PART OF 10B-A-55 Watershed: ☐ Yes X ☐ No

OWNER OR CONTRACTOR C. DOUGLAS MADISON, JR PHONE: Business 873-0521 Home

ADDRESS 1805 SAFRIET ROAD, STATESVILLE, NC 28677

LOCATION US 21N, TR JANE SOWERS ROAD, TR ROLLING MEADOWS LANE, LOT #5 AT END ON RIGHT ON CUL-DE-SAC

SUBDIVISION ROLLING MEADOWS BLOCK / SECTION LOT 5 LOT AREA 27,648.73 FT² SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.25 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 8-27-96 ☒ New System ☐ Repair System Type: I. II (III) IV. V. VI

Pump Tank: Gallons; PT Date System Description: CHAMBERED GRAVITY

Pump Make: Model Serial No Repair System Description: CHAMBERED, PUMP

Nitrification Field: No Fields 1 Square Feet EQ to 1440 Linear Feet 360+ Maintenance Agreement Required: ☐ Yes ☒ No

No Lines SIX Trench Width 36" Max Trench Bottom Depth 24-36" Gravel Depth N/A

☑ House/Mod. Home No. Bedrooms 3 ☐ Mobile Home No. Bathrooms 2 ☐ Business No. Employees ☐ Other

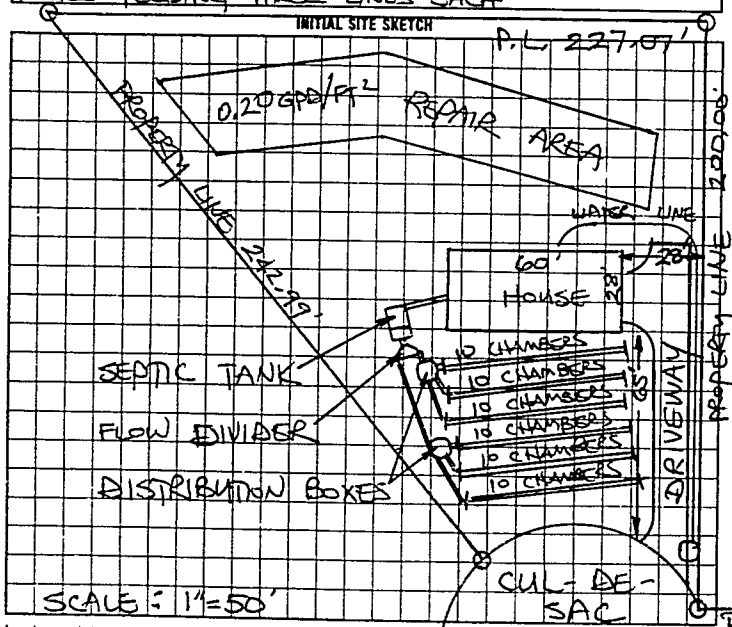
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments: ① INSTALL 60 CHAMBERS IN SIX EQUAL LENGTH LINES AS SHOWN ② USE ONE ROW DIVIDER TEE TO ACHIEVE EQUAL DISTRIBUTION INTO TWO DISTRIBUTION BOXES FEEDING THREE LINES EACH

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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.

Authorization to Construct is valid five (5) years from date of issuance. Improvement Permit has no expiration date.

Signed: Michael L. Gaither

Improvement Permit by: STEVE HEDRICK date 6-15-96

Authorization to Construct by: STEVE HEDRICK date 6-15-96

Installed by: TOMMY FRYE

Certificate of Completion by: XXXXXXXXXXXXXX date

Operation Permit by: STEVE HEDRICK date 12-4-96

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