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. 68544 DATE 8-12-97 TAX MAP NO. 4756 66 8680 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Stephen Smoot PHONE: Business 704 873 0205 Home

ADDRESS 144 Antler Dr. Statesville

LOCATION Jane Sowers TR Tracy LN TR Greenfield DR to end

SUBDIVISION Grantview BLOCK / SECTION LOT 3'5 LOT AREA 1.66 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3 gal/sq/day

Septic Tank: 1000 Gallons; STB 1012 Date 9-16-97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Conv. Gravity

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

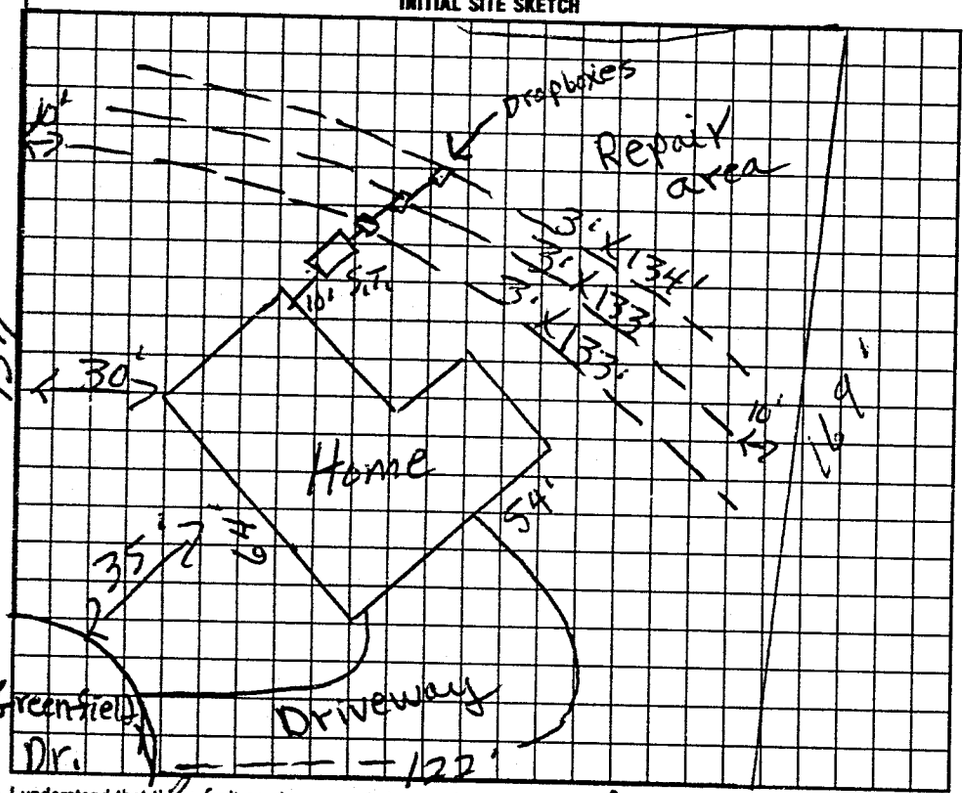
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as shown

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: Stephen H. Smoot

Improvement Permit by: L.C. Moore date 8-12-97

Authorization to Existing System Inspection by: L.C. Moore date 8-12-97 to cont.

Installed by: David Yantz

Certificate of Completion by: date

Operation Permit by: Mark C. Oates date 1-5-98

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

Authorization to Cont Expires 6 mos from issue