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. 70021 DATE 10-23-97 TAX MAP NO. 4756 17 6 1491 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Shirley Wyatt PHONE: Business _____ Home 704 872 7680 6

ADDRESS 118 Chantilly Lane Statesville, N.C.

LOCATION Old Mocksville TL Jane Sowers TL Tracy TR Greenfield 2nd Hse Left

SUBDIVISION Grandview BLOCK / SECTION _____ LOT 32 LOT AREA 1.52 acres SITE CLASS. _____ DESIGN FLOW 360 L.T.A.R. .30

Septic Tank: 1000 Gallons; STB 1017 Date 11-17-97

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Gravity Chamber

Repair System Description: pump to 14 of Hgts

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 3

☐ Business No. Employees ____

☐ Other _____

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

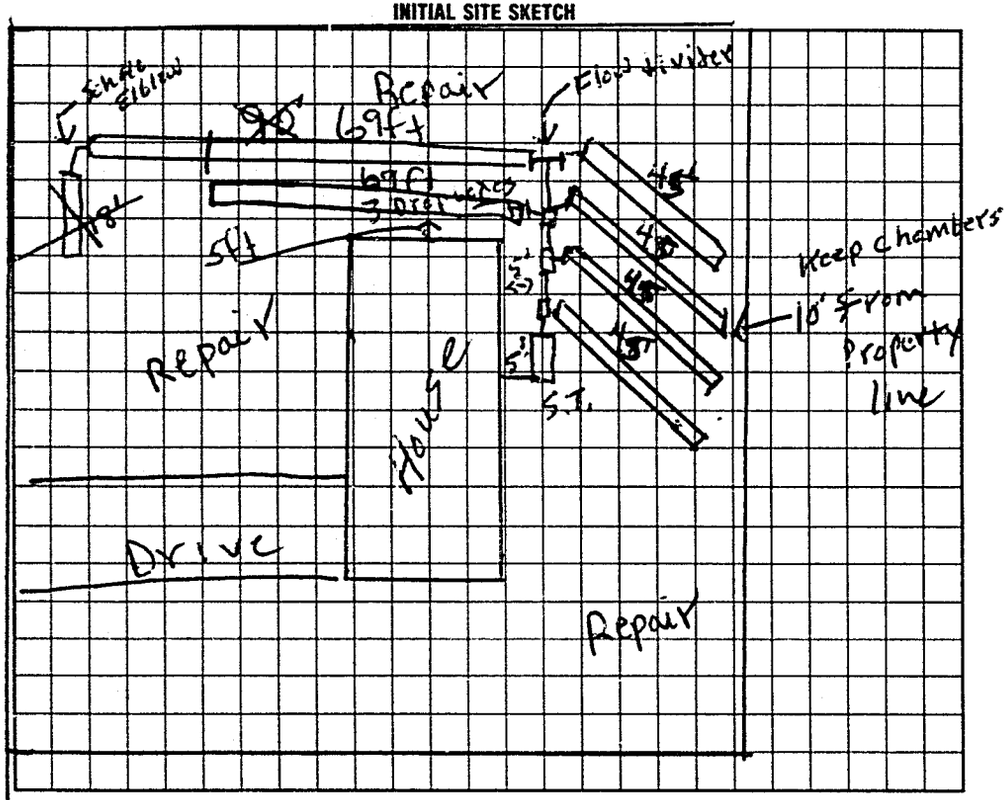
Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

Comments:

* Note - keep water line 10 ft from system
90 ft line split into 2 lines
18 ft

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: Shirley Wyatt Installed by: A-1 Backhoe

Improvement Permit by: E.C. Moore date 10-23-97 Certificate of Completion by: _____ date _____

Existing System Inspection by: E.C. Moore date 10-23-97 Operation Permit by: Mary C. O'Day RS date 3-4-98

authorization to cont.

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

Authorization to cont Expires 60 mos from issue

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