K.W. Nicholson

12:00

IREDELL COUNTY HEALTH DEPARTMENT

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

52624

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

PROPERTY DESCRIPTION NO. 18928 DATE 8-17-94 TAX MAP NO. 10 G-8-A-31 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Jerry Fox PHONE: Business Home 872-1963

ADDRESS Rt 9 Box 232-J Sta

LOCATION Jane Sowers Rd Turn [redacted] Tracey Ln off Greenfield

SUBDIVISION Grandview Est. BLOCK / SECTION LOT 31 LOT AREA 150 X 150' SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 774 Date 11-2-94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 3 Square Feet 1080 Linear Feet 360

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: Pump To Porus Block Panel

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

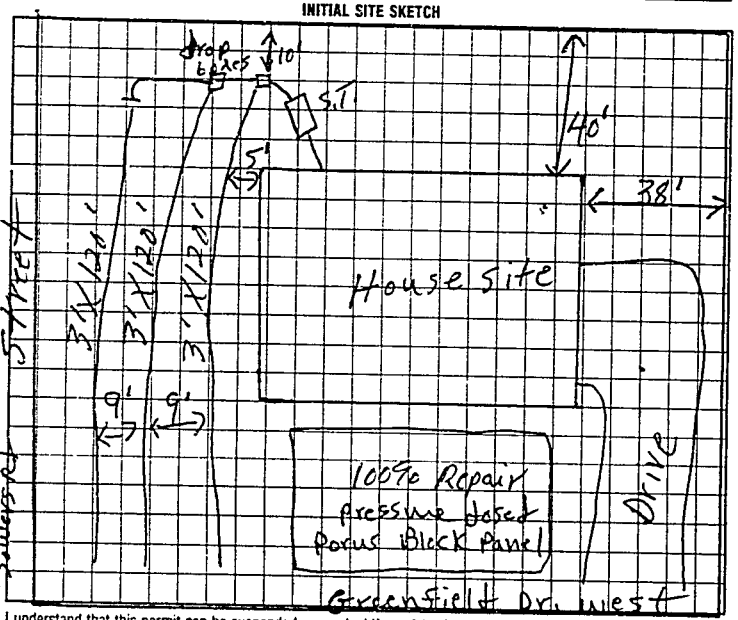
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH

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. Improvement Permit is valid for 60 months from date of issuance.

Signed: X K W Nicholson Inc (Keith Nicholson pres)

Improvement Permit by: J. C. Moore date 8-17-94

Existing System Inspection by: date

Installed by: A-1 Backhoe

Certificate of Completion by: J. C. Moore date 1-5-95

Operation Permit by: date

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

252000