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. REPAID DATE 5-27-97 TAX MAP NO. Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR WARREN JOHNSON PHONE: Business Home 876-1825

ADDRESS 369 FAIRMONT ROAD STATESVILLE NC 28677

LOCATION US 21 N, TL FAIRMONT, TR JONBE DRIVE, 1ST ON RIGHT

SUBDIVISION BLOCK / SECTION LOT 1 LOT AREA SITE CLASS. PS DESIGN FLOW 240 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 240 Linear Feet 80

No Lines 1 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 24"

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

System Description:

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

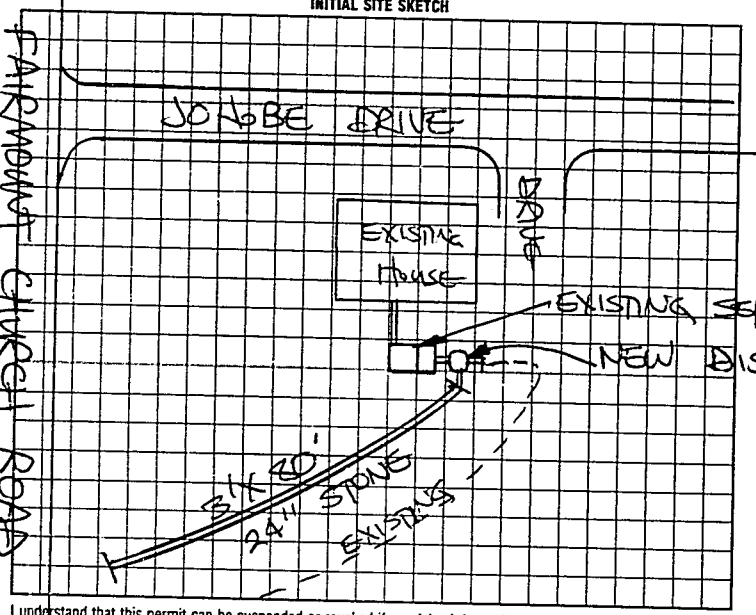
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☒ Public

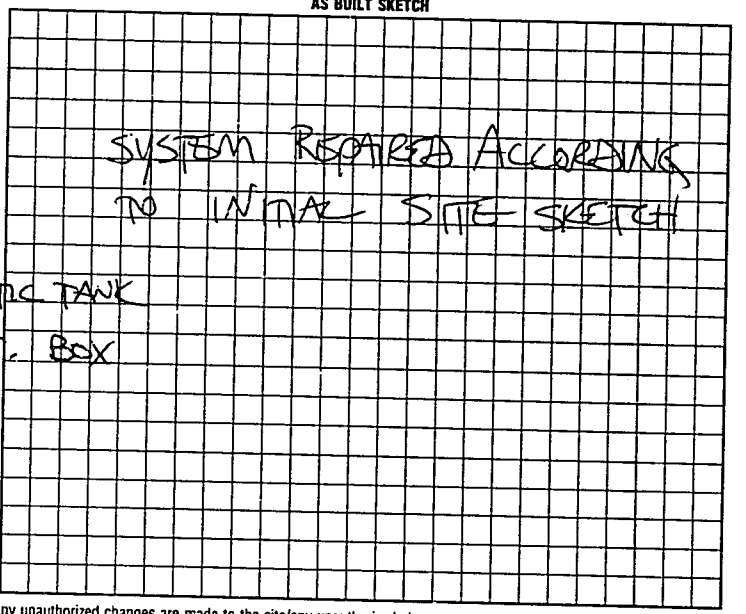
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



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. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUE

Signed: Warren Johnson

Improvement Permit by: STEVE HEDRICK date 5-27-97

~~Existing System Inspection~~ AUTH. TO CONST. by: STEVE HEDRICK date 5-27-97

Installed by: KENNY MADISON

~~Certificate of Completion~~ by: date

Operation Permit by: STEVE HEDRICK date 5-28-97

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

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