50034

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. 17691 DATE 1-12-94 TAX MAP NO. 5E-A-46 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR Kevin Beard PHONE: Business Home 878 8856

ADDRESS P O Box 522 Troutman N.C. 28166

LOCATION 70 E TR Bethesda Park 3rd crush TL mccoy Fn 1/8 mi on left.

SUBDIVISION BLOCK / SECTION LOT LOT AREA SITE CLASS DESIGN FLOW L.T.A.R.

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 630 Linear Feet 210

No Lines 3 Trench Width 36 Max Trench Bottom Depth 24 Gravel Depth 12

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

System Description:

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

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

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other

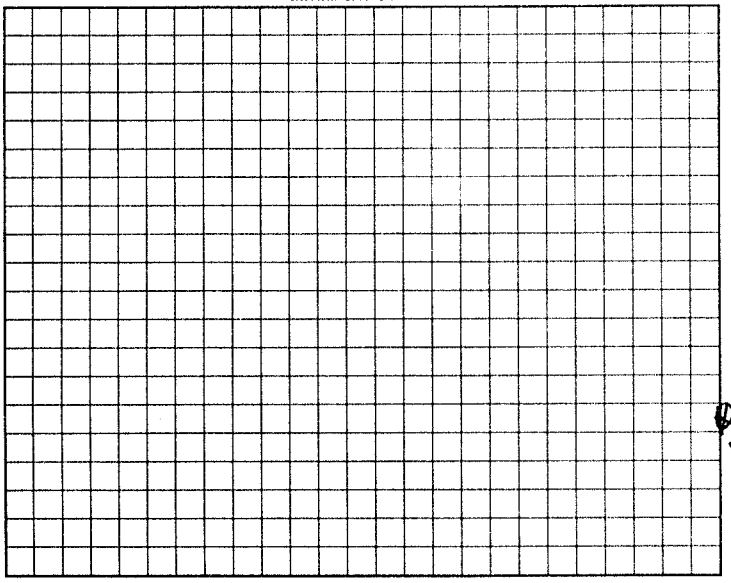
No. Bedrooms 2 No. Bathrooms 2 No. Employees

Water Supply: ☒ Individual ☐ Community ☐ Public

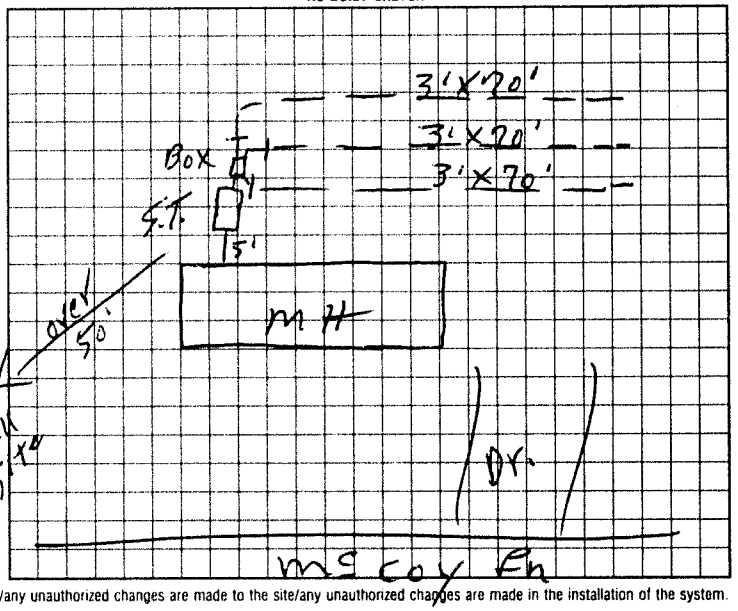
Comments:

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.

Signed:

Installed by: Donald Fackler 10-2-90

Improvement Permit by: date

Certificate of Completion by: date

Existing System Inspection by: R. C. Moore date 1-12-94

Operation Permit by: date

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