IREDELL COUNTY HEALTH DEPARTMENT

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

49331

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

PROPERTY DESCRIPTION NO. 17201 DATE 10-27-93 TAX MAP NO. 5J-4-A-41 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR Johnny R Whitaker PHONE: Business _____ Home 873-2435

ADDRESS RTN Box 408 Sta.

LOCATION 70E TR Bethesda TL Cornflower TR Pine Tree TL Log Cabin circle TL on rt

SUBDIVISION Pine Tree Em BLOCK / SECTION _____ LOT 41 LOT AREA 4.86 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 6-8-94

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

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

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: Conv Gravity

Repair System Description: Conv. Pressure

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

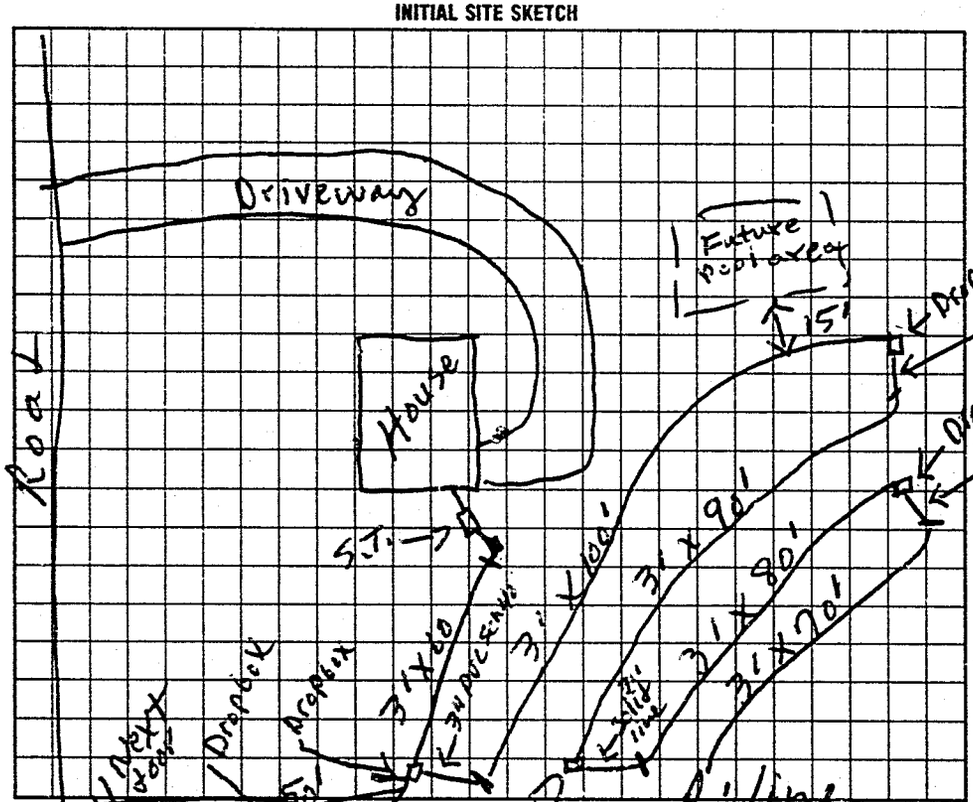
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

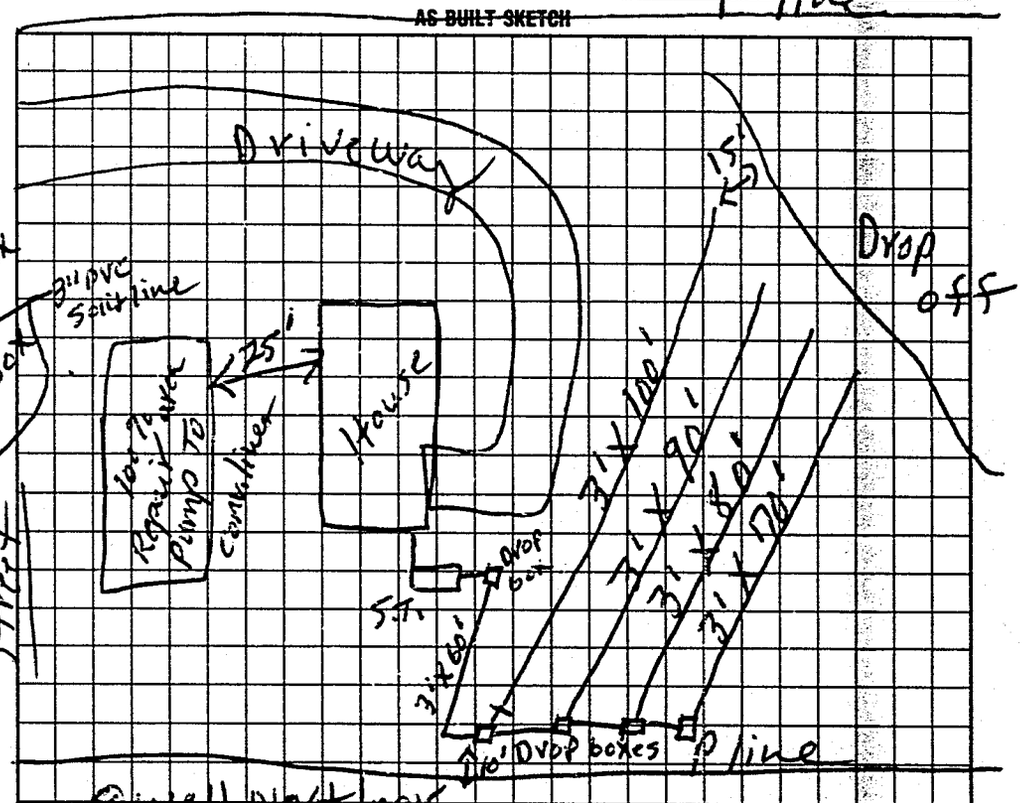
Comments: Run Drain lines On Contour of Slope as Shown

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 Facky

Improvement Permit by: P. C. Moore date 10-27-93 Certificate of Completion by: P. C. Moore date 9-2-94

Existing System Inspection by: _____ date _____ Operation Permit by: _____ date _____

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