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. 26017 DATE 2-27-97 ~~TAX MAP NO.~~ Pin 4763-57-3335 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR T+T Co Inc. PHONE: Business 878-6660 Home

ADDRESS 849 Bell Fm Rd Statesville, N.C.

LOCATION 6HE TR Bell Fm Rd TL Oak Creek TR Buckwheat 17th lot left

SUBDIVISION Oakcreek BLOCK / SECTION LOT 345 LOT AREA .4545 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 160 Date 2-2-99

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 4 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: Chambers/Panel

Maintenance Agreement Required: ☐ Yes ☑ No

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

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees

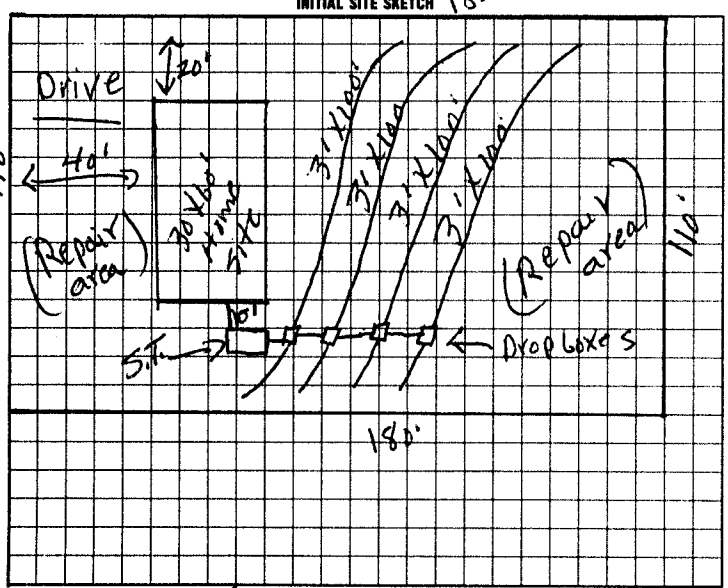
☐ Other

Water Supply: ☐ Individual ☐ Community ☑ Public

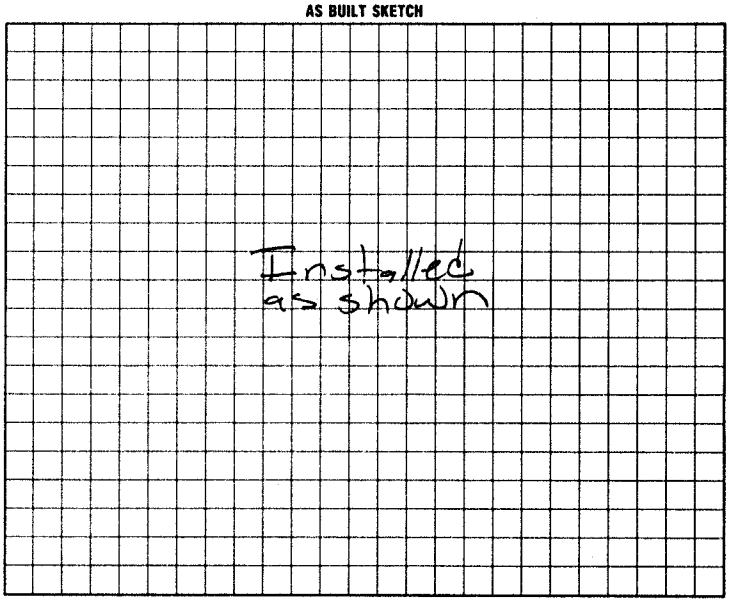
Comments:

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:

Improvement Permit by: P.C. Moore date 2-27-97

Authorization to Cover Existing System Inspection by: P.C. Moore date 2-27-97

Installed by: Berry Sigmon

Certificate of Completion by: date

Operation Permit by: Mark Coutts date 3-30-99

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

Authorization to Cover. Expires 60 months from issue