IREDELL COUNTY HEALTH DEPARTMENT

Not a computer Carlson on PC 52023

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

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

PROPERTY DESCRIPTION NO. 19112 DATE 6-27-94 TAX MAP NO. 5N-A-167 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Calvin Karlson PHONE: Business Home 878-2224

ADDRESS R+ 15 Sta.

LOCATION 64E TR Bell Fm Rd TR Farmbrook To end on left

SUBDIVISION Farmbrook BLOCK / SECTION LOT LOT AREA 2.0 acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .135

Septic Tank: 1000 Gallons; STB 1012 Date 9-N-94

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1035 Linear Feet 345

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

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

System Description: Conv. Gravity

Repair System Description: " "

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2½

☐ Business No. Employees

☐ Other

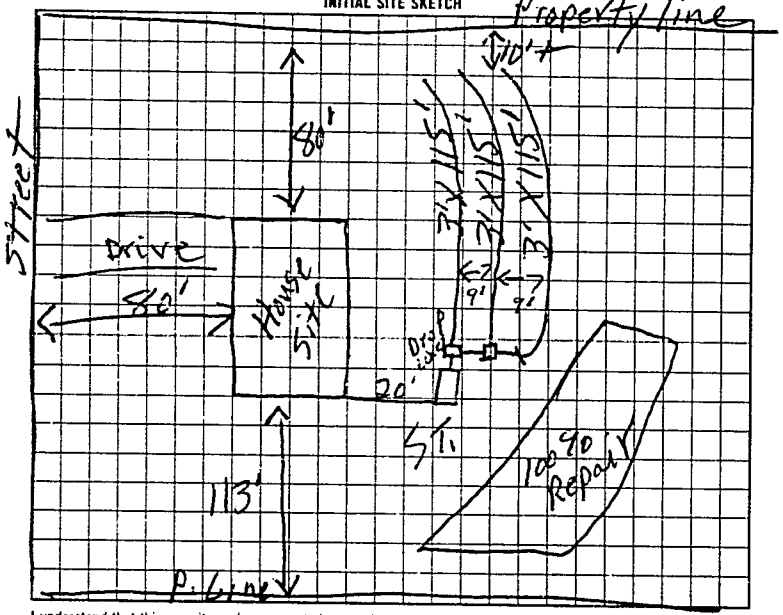
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☑ Public

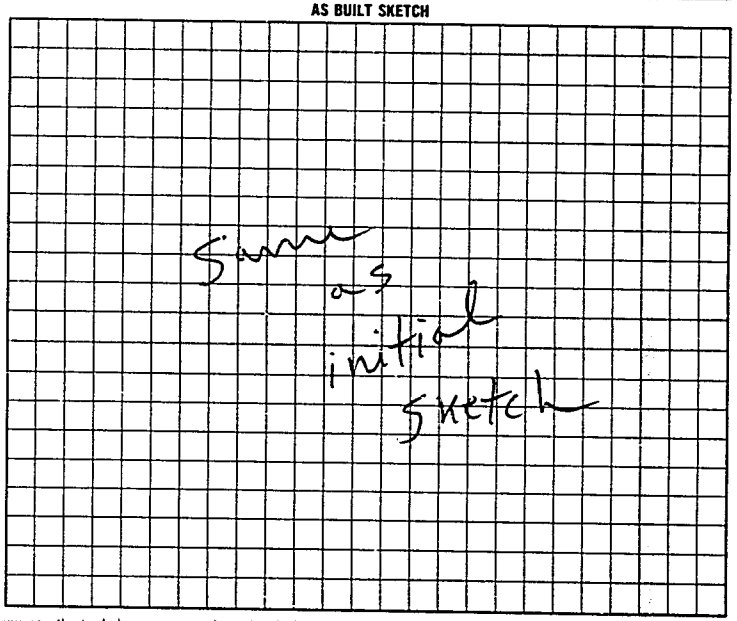
Comments:

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.

Signed: x Jeffrey Horne

Improvement Permit by: E.C. Moore date 6-27-94

Existing System Inspection by date

Installed by: Donald Lackey

Certificate of Completion by: J.C. Moore date 11-17-94

Operation Permit by date

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

LS8000