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. 17370 DATE 12-9-93 TAX MAP NO. 5 N-A-40 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR R. Von Bell PHONE: Business Home 873-3750

ADDRESS Rt 15 Box 186 Statesville

LOCATION

SUBDIVISION BLOCK / SECTION LOT LOT AREA acreage SITE CLASS. DESIGN FLOW L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 782 Date 10-28-93

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

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

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

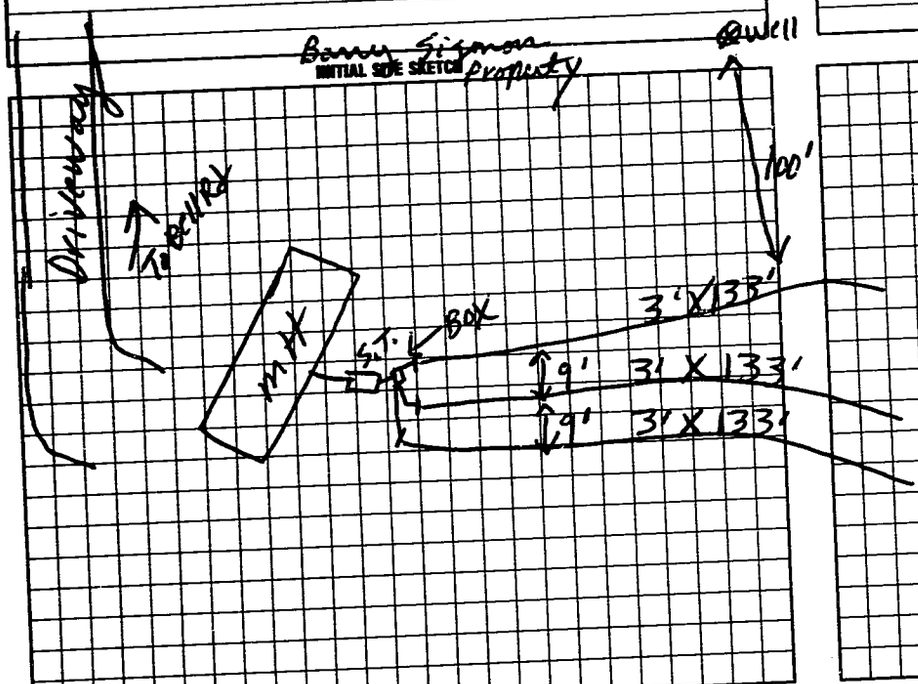
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

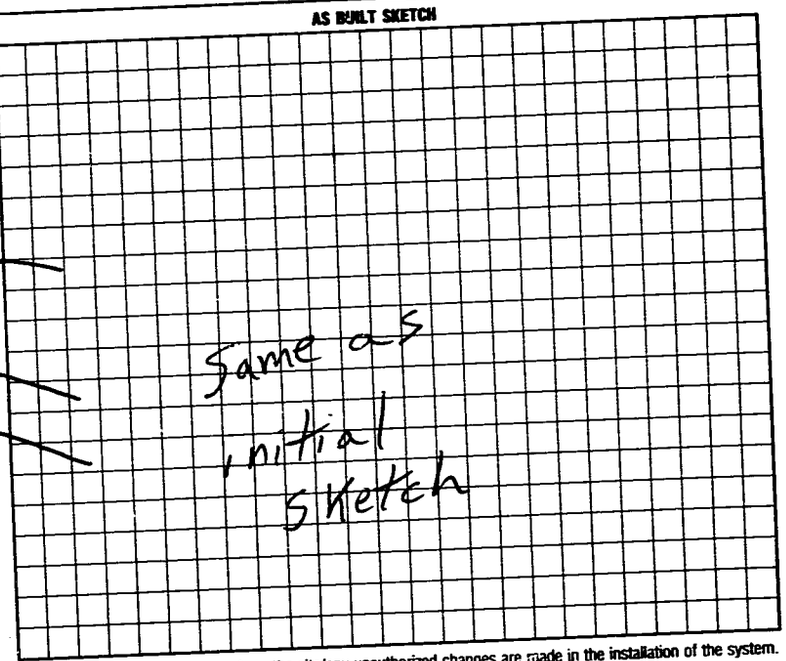
Comments:

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 R. Von Bell

Improvement Permit by: E. C. moore date 12-9-93

Existing System Inspection by: date

Installed by: A-1 Backhoe

Certificate of Completion by: E. C. moore date 12-13-93

Operation Permit by: date

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