63096

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. 24579 DATE 9-10-96 TAX MAP NO. 11m-1- A-13 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Acorn Development Co. PHONE: Business _____ Home 8720077

ADDRESS PO BOX 5171 Sta

LOCATION 21N TR Dunlap Cove TR Farmview Tenant Rd

SUBDIVISION Farmview BLOCK / SECTION _____ LOT 13 LOT AREA 100'X232' SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 1.3

Septic Tank: _____ Gallons: STB _____ Date _____

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: Gravity chambers

Repair System Description: Pump TO chambers

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

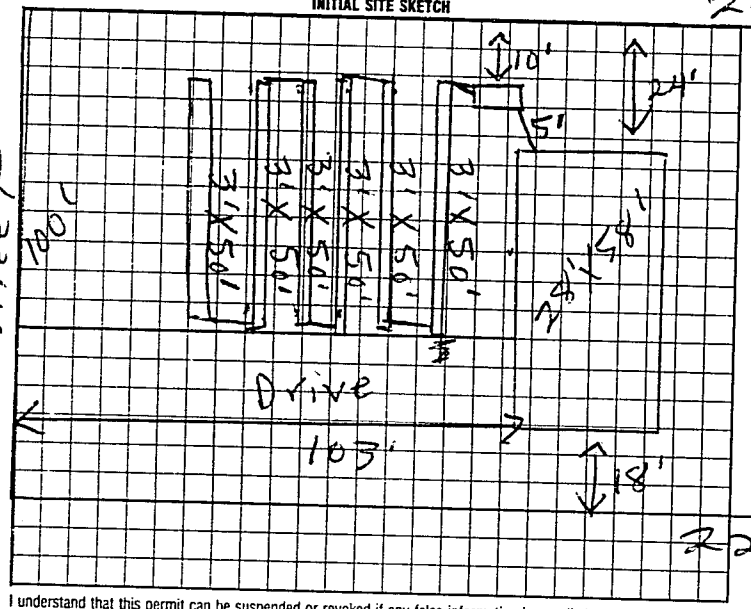
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☐ Individual
☐ Community
☑ Public

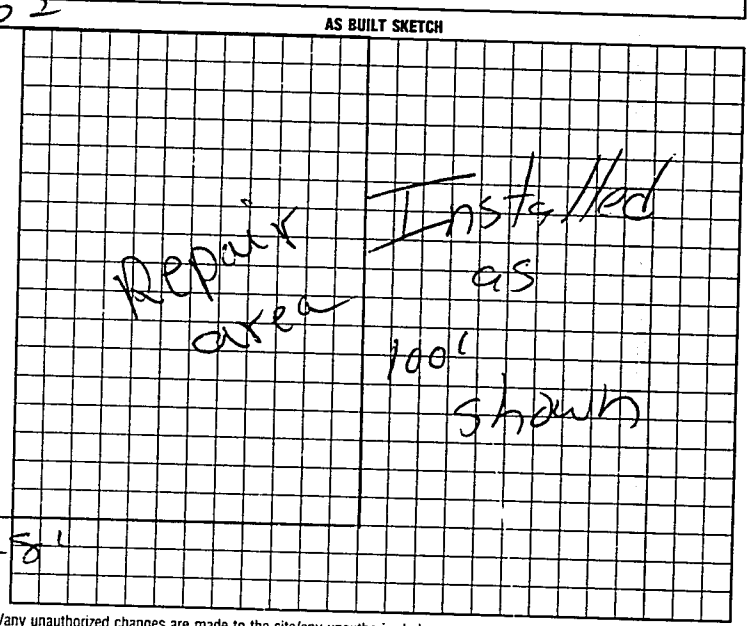
Comments:

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.

Signed Thomas J. White

Improvement Permit by: L.C. Moore date 9-10-96

Existing System Inspection by: L.C. Moore date 9-10-96

Installed by: A-1 Backhoe

Certificate of Completion by: _____ date _____

Operation Permit by: Mark C. Ortz REHS date 4-15-97

to commence. COPY: WHITE INSPECTION COPY (FINAL) GREEN OWNER COPY (FINAL) YELLOW INSPECTION COPY (INITIAL) PINK OWNER COPY (INITIAL) GOLD

Authorization to const. expires 60 days from issue.