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. 17252 DATE 10-21-93 TAX MAP NO. 2F-A-20

OWNER OR CONTRACTOR Brandon Ladd PHONE: Business Home 873-0218 Watershed: ☐ Yes ☐ No

ADDRESS Rt 11 Box 304 B

LOCATION 705 TR Triplett Tb water main at end TR Gone - Away Hyomi Intent upt

SUBDIVISION Willow Ridge BLOCK / SECTION 2 LOT 84 LOT AREA 1.56 acres SITE CLASS. PS DESIGN FLOW 240gpd T.A.R. .75

Septic Tank: 1000 Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 12 Trench Width 36 Max Trench Bottom Depth 36

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

System Description: Conv. Gravity

Repair System Description: Conv. Pump

Maintenance Agreement Required: ☐ Yes ☐ No

Gravel Depth 12 ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☒ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

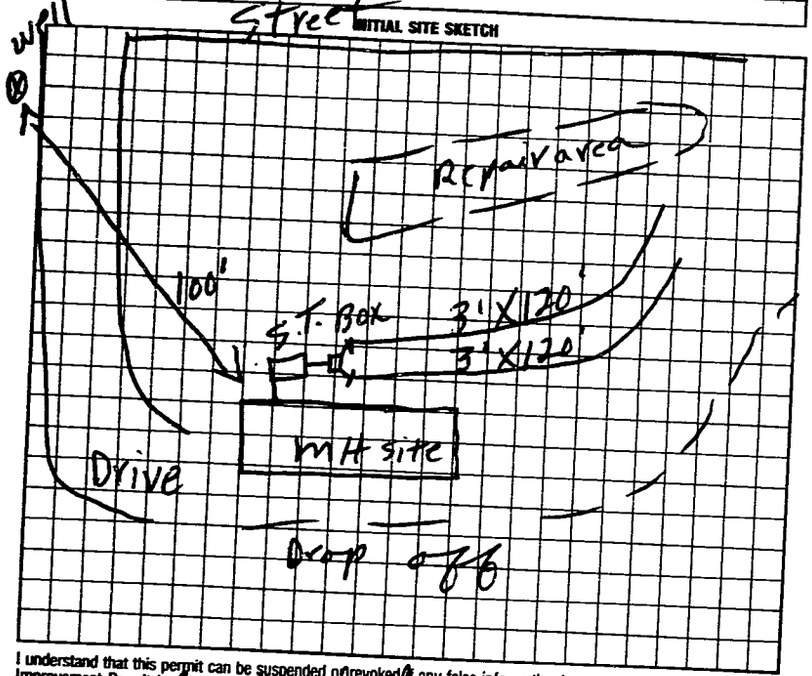
☐ Other

Water Supply: ☐ Individual ☐ Community ☐ Public

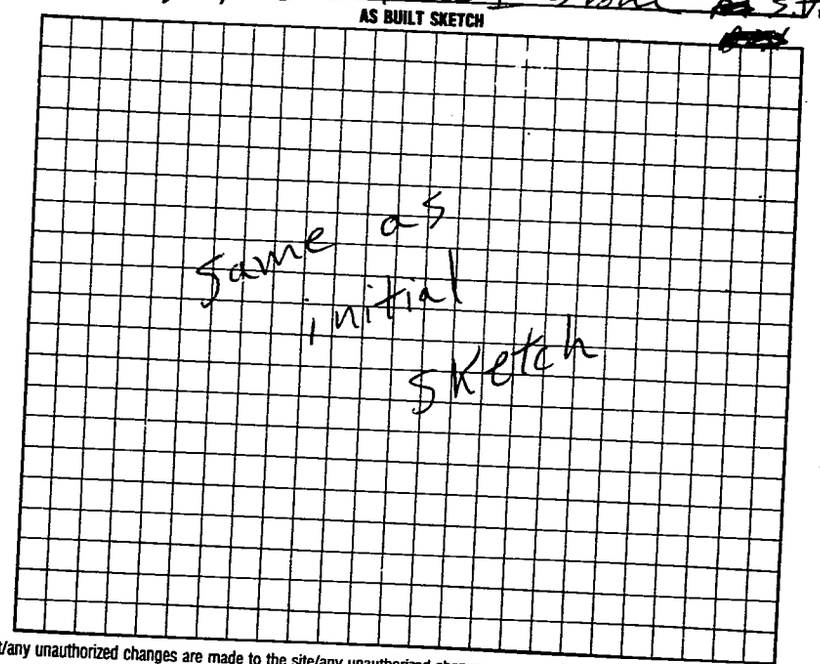
Comments:

Comments: well + mobile Home NOT located on site at this Inspection Time, locate well + septic at proper distances from S.T.

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 Brandon Ladd

Improvement Permit by: R. C. Moore date 10-21-93

Existing System Inspection by: date

Installed by: Dellinger S.T.

Certificate of Completion by: R. C. Moore date 11-9-93

Operation Permit by: date

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