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. 68019 DATE 7-12-97 TAX MAP NO. 4772 88 2657 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR Acorn Development PHONE: Business 872 0072 Home

ADDRESS PO 5641 Sta

LOCATION 70 S TR Knox Fm Rd 1/4 mi Rt.

SUBDIVISION Crestfield BLOCK / SECTION LOT 4 LOT AREA 21528 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 2-6-00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 936 Linear Feet 312
No Lines 4 Trench Width 3½" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity/Chamber
Repair System Description: II / Panels
Maintenance Agreement Required: ☐ Yes ☑ No

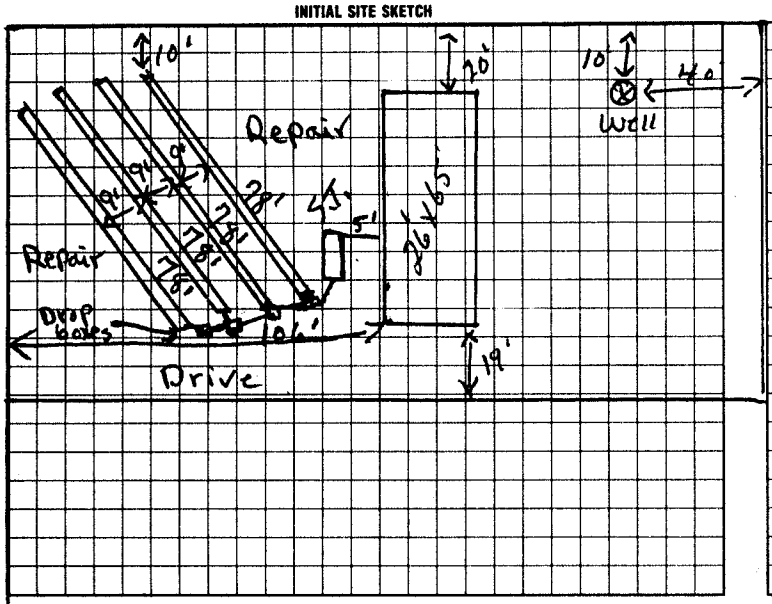
☐ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

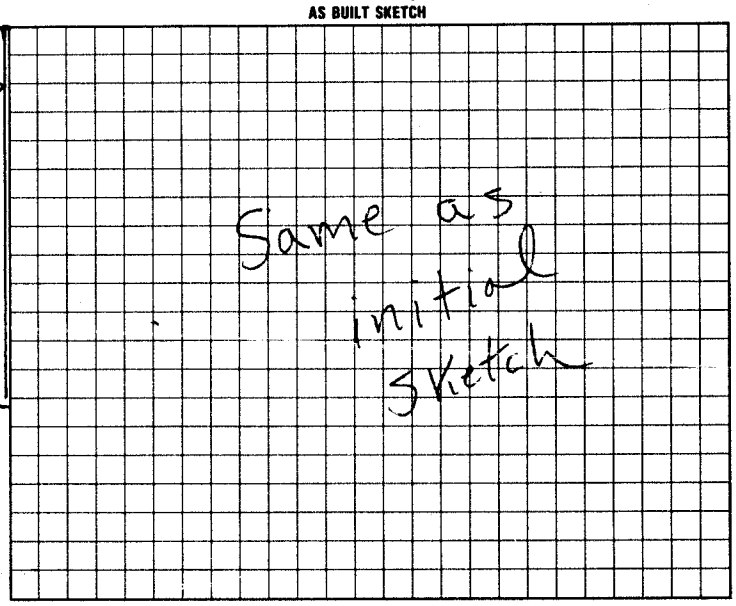
Comments:

Comments: Well Not on site at Time of This Insp. Locate as Shown

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: Thomas J. White

Improvement Permit by: T. C. Moore date 7-12-97
Authorization to Existing System Inspection by: T. C. Moore date 7-12-97
to cover

Installed by: Craig Thompson
Certificate of Completion by: T. C. Moore date
Operation Permit by: date 3-22-00

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

Authorization to Count. Expires 60 mos from issue