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. 65794 DATE 8-20-97 TAX MAP NO. 4773964098

OWNER OR CONTRACTOR Bill Bass PHONE: Business Watershed: ☐ Yes ☐ No

ADDRESS 1059 Elmwood Rd Sta Home 704 924 8191

LOCATION

SUBDIVISION BLOCK / SECTION LOT LOT AREA 100 acres SITE CLASS. DESIGN FLOW 360 L.T.A.R. .17 gal/sq ft/day

Septic Tank: 1000 Gallons; STB 1012 Date 9-13-98 ☑ New System ☐ Repair System Type: I, II, III, IV, V, VI

Pump Tank: Gallons; PT Date System Description: Conv. Gravity

Pump Make: Model Serial No. Repair System Description: Pump to Chambers

Nitrification Field: No Fields 1 Square Feet 2100 Linear Feet 700 Maintenance Agreement Required: ☐ Yes ☑ No

No Lines 6 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other

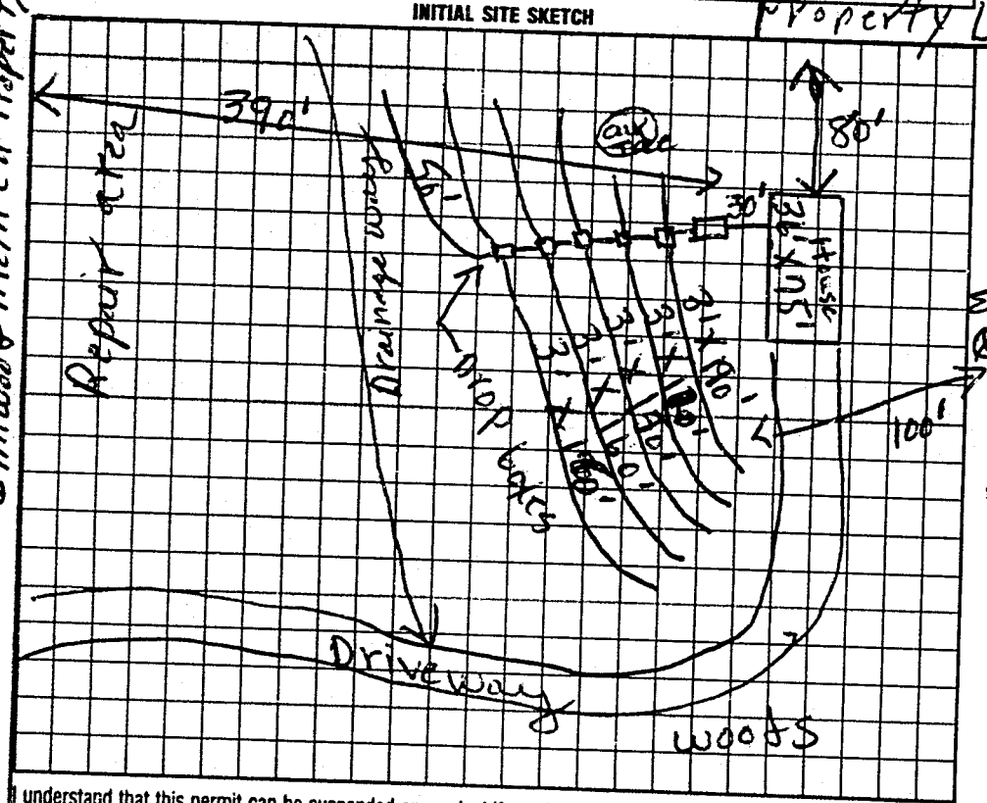
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☑ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Community ☐ Public

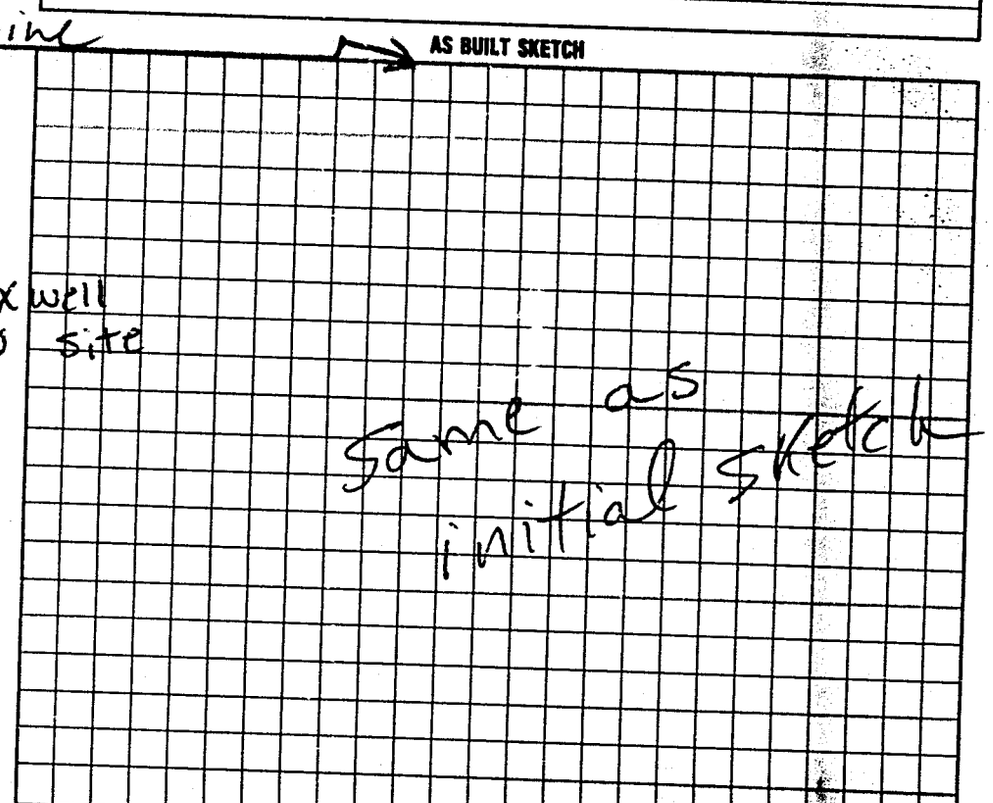
Comments:

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: Bill Bass

Improvement Permit by: P. C. Moore date 8-20-97

Authorization Existing System Inspection by: P. C. Moore date 8-20-97

to cont.

Installed by: Tommy Frye

Certificate of Completion by: date

Operation Permit by: P. C. Moore date 11-9-98

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

Authorization to cont. Expires 60 mos from issue