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. ~~2 to 3 of~~ 66441 DATE 4-11-97 TAX MAP NO. Pin No. 4785 87 3492 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Hubert G. Dickerson Jr. PHONE: Business _____ Home 878-2532

ADDRESS 174 Keaton Rd Cleveland

LOCATION 64E TR Barry oak TL Keaton Rd 1/4 mi TR back off road 1000' +

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 60 acres SITE CLASS. _____ DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 750 Linear Feet 250

No Lines 2 Trench Width 36" Max Trench Bottom Depth 18" 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 No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

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

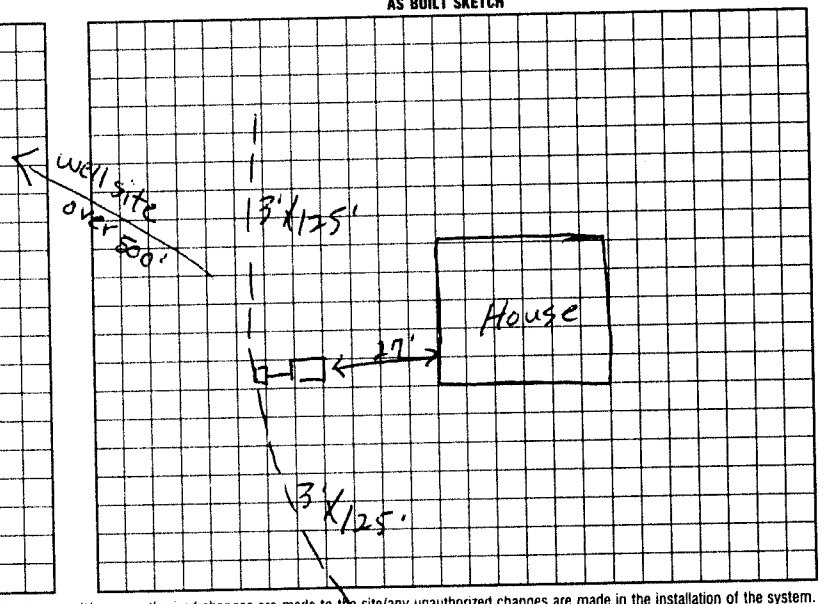
Water Supply:
☑ Individual
☐ Community
☐ Public

Comments:

Comments: System Install 1982 Hubert G Richerson Jr.

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: _____

Improvement Permit by: _____ date _____

Existing System Inspection by: R.C. moore date 4-11-97

Installed by: Ed Ohlese

Certificate of Completion by: R.C. moore date 3-1-82

Operation Permit by: _____ date _____

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