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. 24018 DATE 6-22-96 TAX MAP NO 11K-3-A-4 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR Fil Pishner PHONE: Business Home 873-7130

ADDRESS PO Box 262 Harmony

LOCATION 64E IL Cool Spring / RT TR Lossiehead TR ~~Sunset~~ Horizon Dr. 2nd lot Rt

SUBDIVISION Sunset Village BLOCK / SECTION LOT 4 LOT AREA 3/4 acre SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 620 Date 8-15-96
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III. IV. V. VI
System Description: Conv. Gravity
Repair System Description: Conv. Gravity
Maintenance Agreement Required: ☐ Yes ☑ No

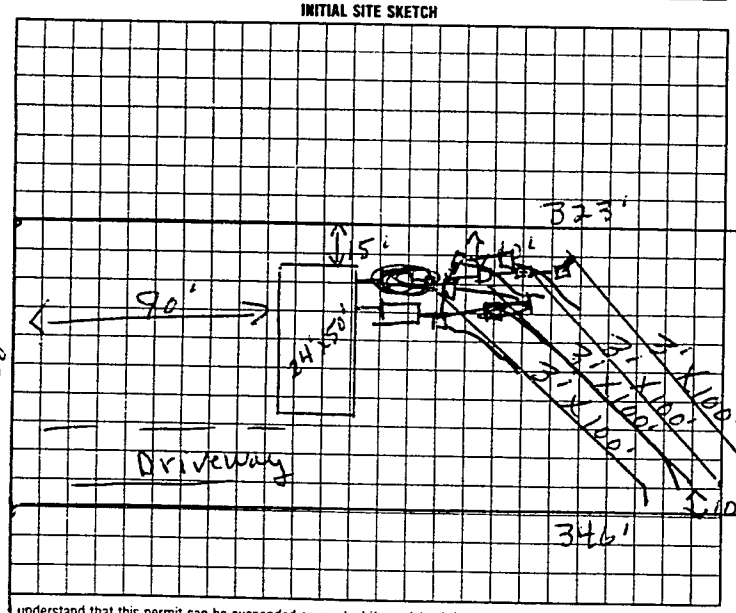
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

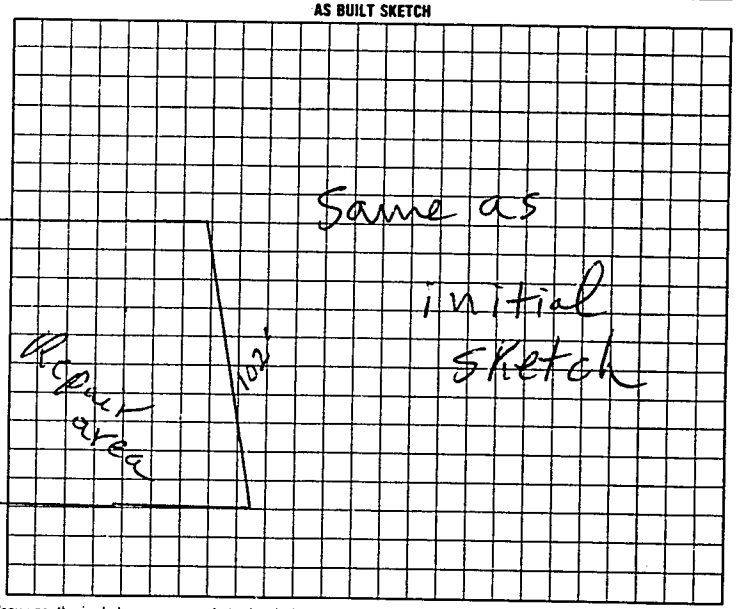
Comments:

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: Fil Pishner

Improvement Permit by: L-C. Moore date 6-22-96

Authorization to Const. Existing System Inspection by: L-C. Moore date 6-22-96

Installed by: Sammy Reavis

Certificate of Completion by: date

Operation Permit by: L-C. Moore date 10-22-96

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

Authorization to Const. Expires 60 mos from issue

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