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. 20630 DATE 3-23-95 TAX MAP NO. 11K-2-A-11 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR John R. Gaither PHONE: Business 873-1014 Home ~~873-1014~~

ADDRESS 596 Mocksville Hwy Statesville

LOCATION 64E TL Cool Spring Rd TR Loggerhead TR Durand 2nd Lot Rt

SUBDIVISION Campbell Est BLOCK / SECTION LOT 11 LOT AREA SITE CLASS. DESIGN FLOW 240 L.T.A.R. .32

Septic Tank: 1000 Gallons; STB 1620 Date 3-6-95

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

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

No Lines 3 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: 15 11

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 2

☒ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

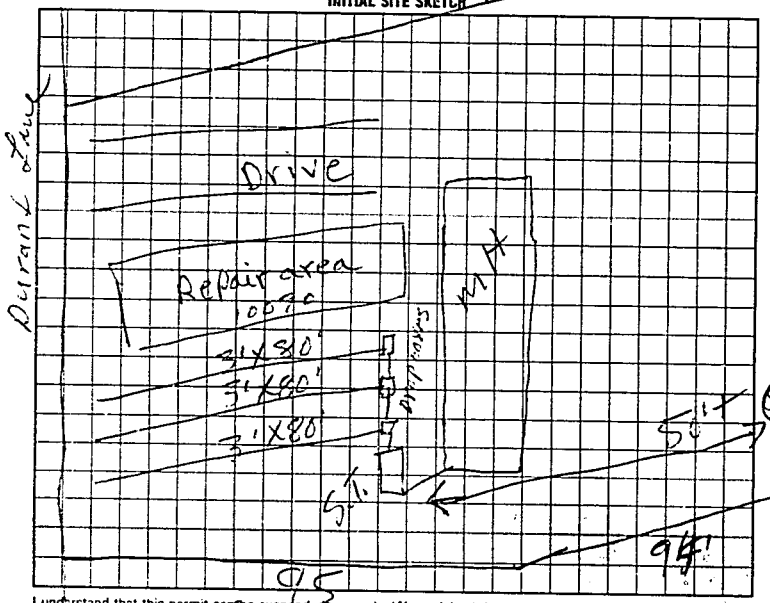
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public

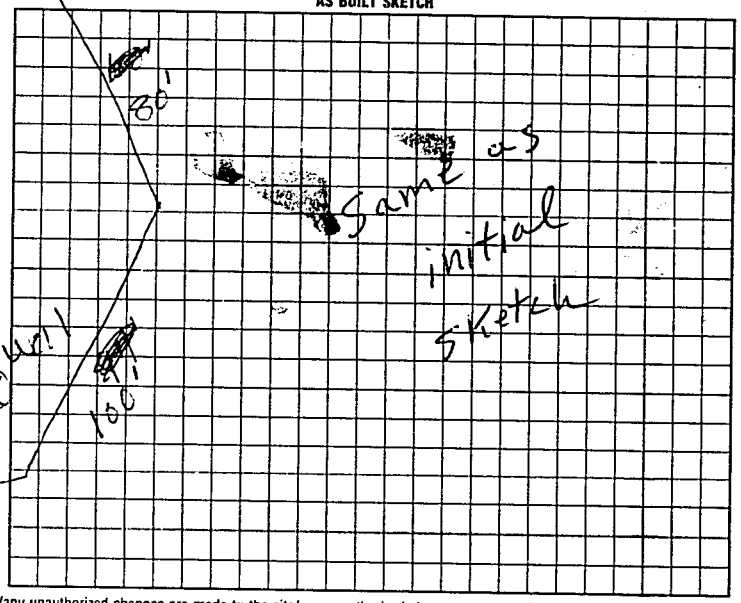
Comments:

Comments:

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

Improvement Permit by: L. C. Moore date 3-23-95

Existing System Inspection by date

Installed by: Sammy Reavis

Certificate of Completion by: L. C. Moore date 4-12-95

Operation Permit by date

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

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