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. 070437 DATE 11-20-97 TAX MAP NO. 4787 73 0055 Watershed: ☐ Yes ☑ No

OWNER OR CONTRACTOR DAVID DRISKILL PHONE: Business Home 871-1114

ADDRESS 132 NEW MIXICO DRIVE, STATESVILLE, NC 28677

LOCATION US 64 E, TL COOL SPRINGS RD, TR LOGGERHEAD, TR DURANT, LOT ON (R) AT END

SUBDIVISION CAMPBELL EST BLOCK / SECTION LOT 22 LOT AREA 1.77 ACRES SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 620 Date 12-1997

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

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

☑ New System ☐ Repair System Type: I (II), III, IV, V, VI

System Description: CONVENTIONAL GRAVITY

Repair System Description: CONV. GRAVITY

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

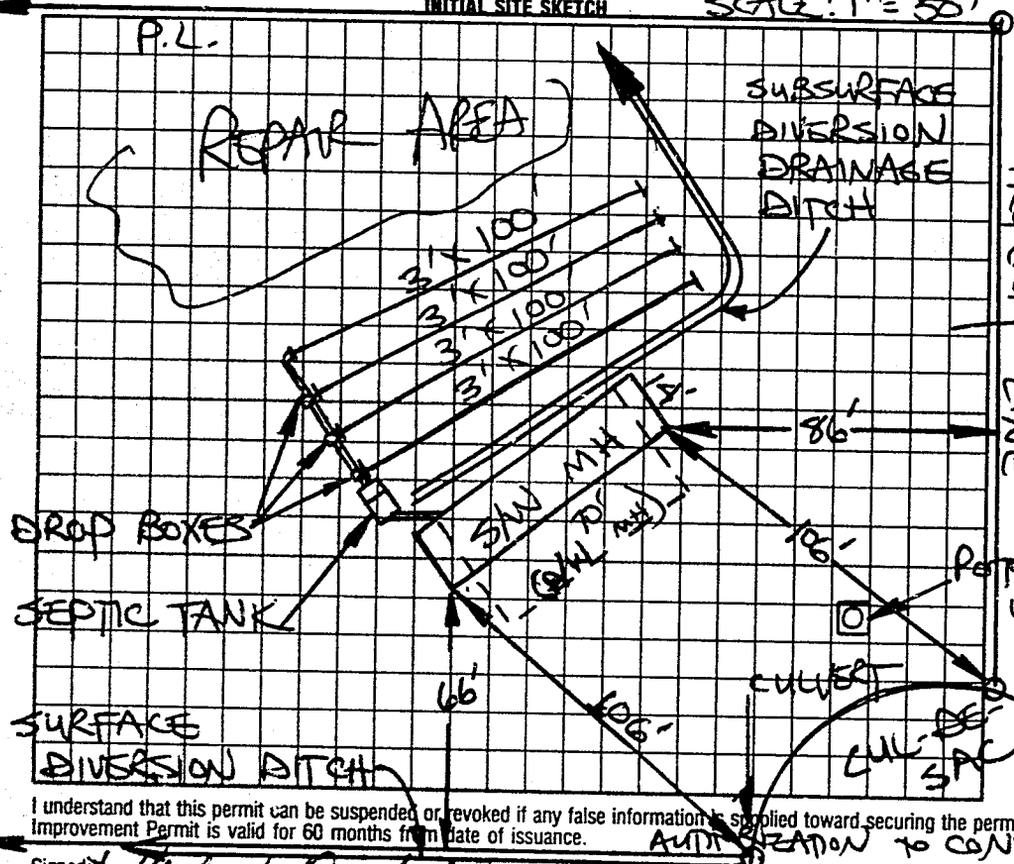
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Community ☐ Public

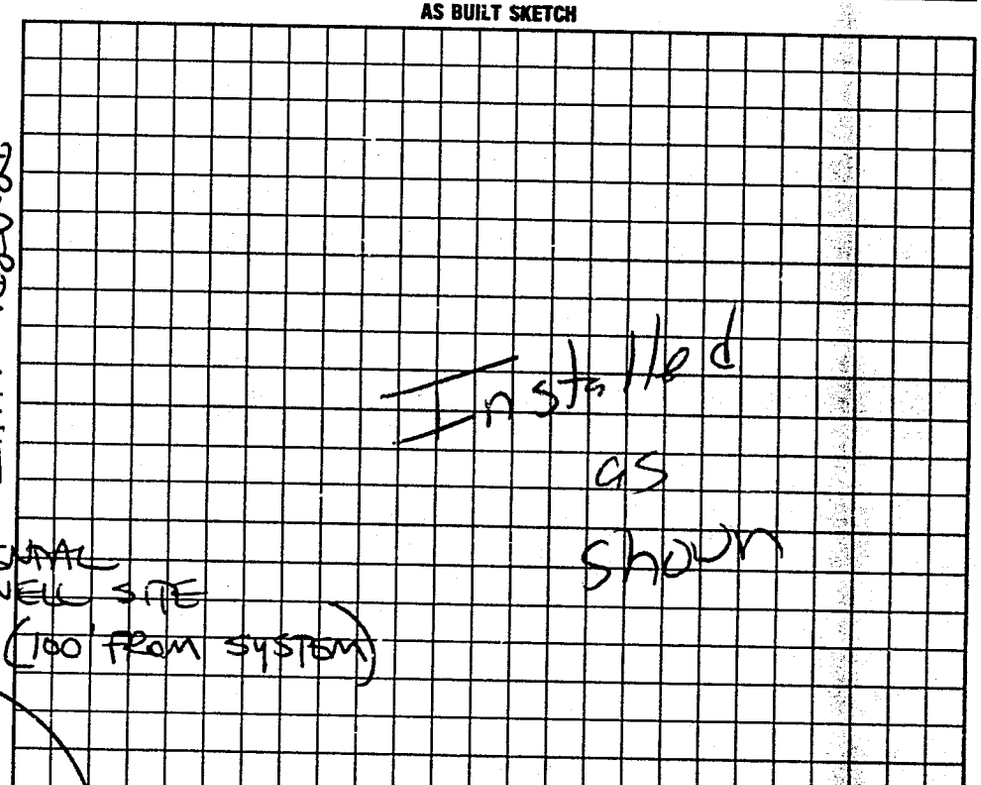
Comments: ① CONSTRUCT SUBSURFACE DIVERSION DRAINAGE DITCH AT LOCATION SHOWN BEGINNING 42" DEEP & OUT TO DAYLIGHT ② CONSTRUCT SURFACE DIVERSION DITCH FROM CULVERT ALONG PROPERTY LINE

Comments:

INITIAL SITE SKETCH SCALE: 1" = 50'



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. AUTHORIZATION TO CONSTRUCT IS VALID FOR 60 MONTHS FROM DATE OF ISSUANCE.

Signed: Steven Hedrick

Improvement Permit by: STEVE HEDRICK date 11-20-97

AUTH. TO CONST.

Existing System Inspection by: STEVE HEDRICK date 11-20-97

Installed by: Sammy Lewis

Certificate of Completion by: date

Operation Permit by: Mark C. Ott PS date 2-26-98

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