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. 17092 DATE 9/24/93 TAX MAP NO. 13L-A-71

OWNER OR CONTRACTOR KENNETH DALE JORDAN PHONE: Business Home

ADDRESS RT. 1, Box 17 OLIN NC 28660

LOCATION US21N, TL JENNINGS RD, MH ON (R) PAST OLIN ROAD (SOUTH)

SUBDIVISION BLOCK / SECTION LOT LOT AREA 3.66AC SITE CLASS PS L.T.A.R EXISTING

Water Supply: ✓Individual ☐ Community ☐ Public WELL

Septic Tank: EXISTING Gallons; STB Date

Pump Tank: Gallons; PT Date

Nitrification Field: No Fields 1 Square Feet Linear Feet EXISTING

No Lines 3 Trench Width Trench Depth Gravel Depth

☐ New System ☐ Repair System Type: I II III IV V VI

System Description: CONV. GRAVITY

Repair System Description:

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

Garbage Disposal: ☐ Yes ✓No

Auto. Dishwasher: ✓Yes ☐ No

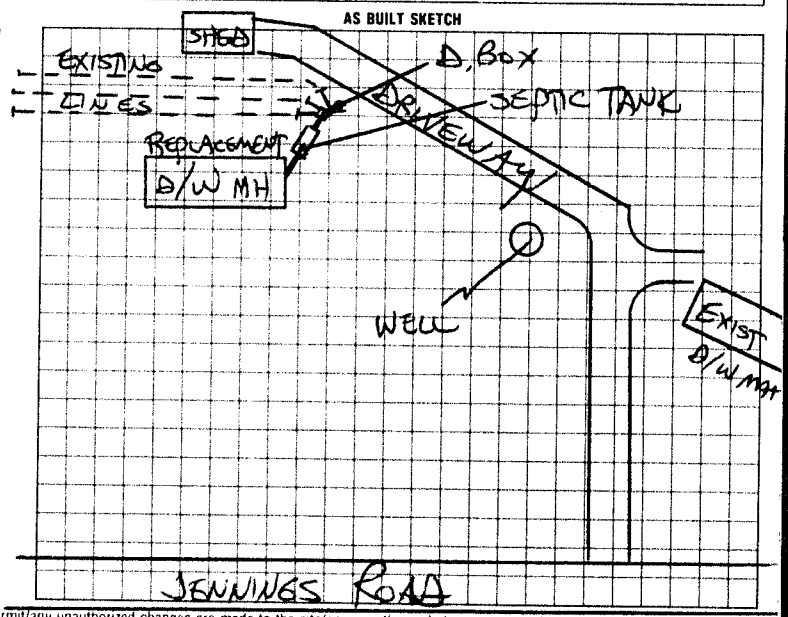
Auto. Washing Machine: ✓Yes ☐ No

Other

Comments KEEP MH MINIMUM 5' FROM SYSTEM.

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: STEVE HEDRICK date 9/24/93

Installed by

Certificate of Completion by: date

Operation Permit by: date

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