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. 20585 DATE 3/21/95 TAX MAP NO. 12P-A-74 Watershed: ☐ Yes ☒ No

OWNER OR CONTRACTOR MARSHA C. BOAN PHONE: Business Home (704) 871-1784

ADDRESS 312 STOCKTON ST. STATESVILLE, NC 28677

LOCATION I-77N TO TR TOMLIN MILL, TL TABOR ~0.5 MILE ON LEFT BACK OFF ROAD

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.01 ACRE SITE CLASS PS DESIGN FLOW 360 L.T.A.R. EXISTING

Septic Tank: 1000 Gallons; STB Date

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 Max Trench Bottom Depth Gravel Depth

☐ 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 ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 3 No. Bathrooms 2 No. Employees

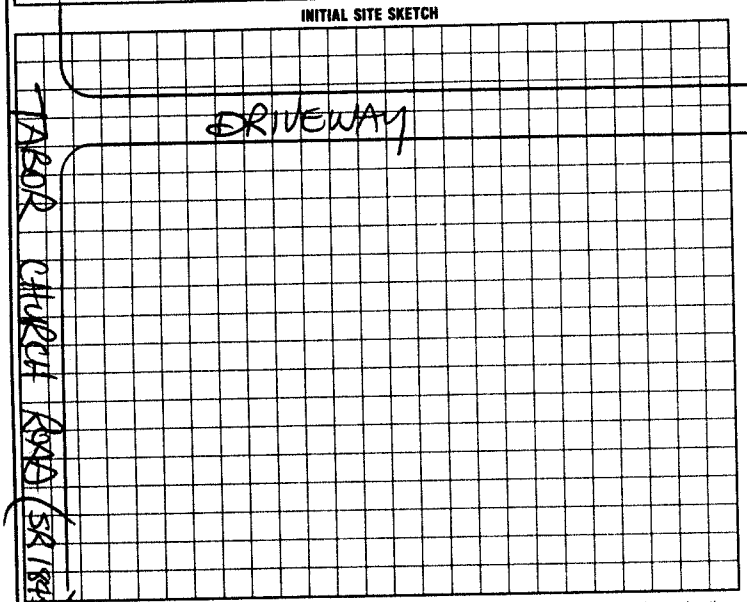
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Community ☐ Public WELL

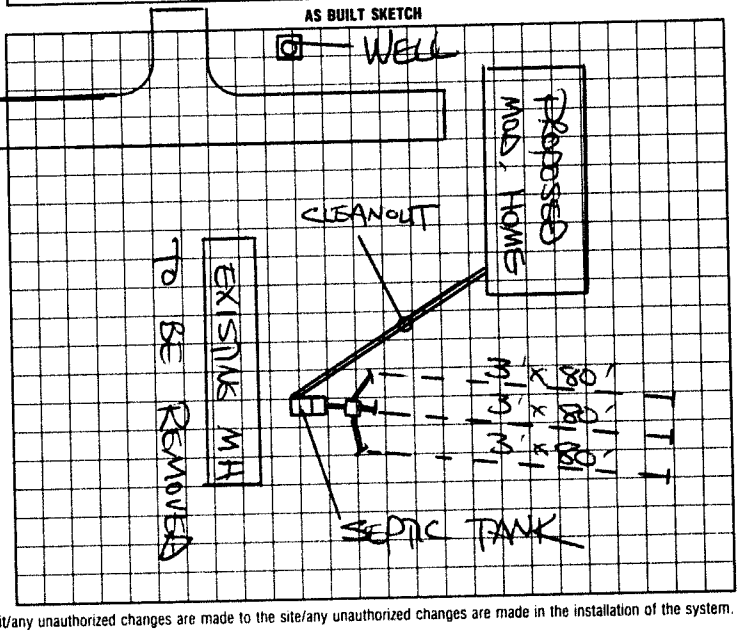
Comments:

Comments: KEEP HOME MINIMUM 5' FROM SYSTEM MH TO BE REMOVED PRIOR TO OCCUPANCY OF HOUSE.

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: Installed by:

Improvement Permit by: date Certificate of Completion by: date

Existing System Inspection by: STEVE HEDRICK date 3/21/95 Operation Permit by: date

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