(C1)

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 145412 PIN# 3774-75-6974 DATE 16 October-07

OWNER OR APPLICANT Jeffrey & Ronda Taylor PHONE: Business 704-872-0404 Home 704-872-9752

ADDRESS 398 Monticello Dr. Statesville, N.C.

LOCATION Shaver School Rd. TL Stewart Rock, TL Fulbright TR into Riverwalk TR River Cliff. Lot on Rt.

SUBDIVISION Riverwalk BLOCK / SECTION VI LOT 10 LOT AREA 6.7 Ac. SITE CLASS PS DESIGN FLOW 480 gpd L.T.A.R. 0.35/FP2/adq

Septic Tank: 1500 Gallons; STB 528 Date 12-11-07

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet ≈1600 Linear Feet 400'

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth _____

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

System Description: 25% Reduction System

Repair System Description: 25% Reduction System

Maintenance Agreement Required: ☐ Yes ☑ No

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

No. Bedrooms 4 No. Persons _____ No. Employees _____

Water Supply: ☐ Individual ☑ Public ☐ Community

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

Comments:/Conditions:

Follow contour/ Honor Setback requirements.

Comments:/Conditions:

Yellow Fitt installed

INITIAL SITE SKETCH

Please see Attached Layout.

AS BUILT SKETCH

Installed as Drawn

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 with plat valid without expiration. ☐ Improvement Permit with site plan valid for sixty months ☑ Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: Jeffrey B Taylor date 10-22-07 Installed by: Steve Jordan

Improvement Permit by: _____, R.S. date 16 October 07 Operation Permit by: _____, R.S. date 13 March 08

Authorization to Construct by: _____, R.S. date 16 October 07 Existing System Inspection by: _____ date _____

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


3774-76-7949
3774-76-0607
3774-76-8466
3774-66-8471
3774-65-8961
3774-86-2027
3774-75-6974
3774-75-5730
3774-75-1594
3774-85-3690
RIVERCLIFF DR
1 inch equals 100 feet
880
890
900
910
920
930
940
950
960
970
980
942
938
988
1070
499
671
660
16
12
11
10
9
211