IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 89565 PIN# 3786808190

OWNER OR CONTRACTOR MAGDALENE CAIN- PHONE: Business _____ Home 5855683 6 DATE 6/6/00

ADDRESS 208 CAIN RD - STONY POINT NC 28678

LOCATION I40 WEST - OLD MOUNTAIN RD - TL CAIN RD - ON RT JUST PAST CURVE - #208

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA 1.44 AC SITE CLASS PS DESIGN FLOW 360gal L.T.A.R. existing

Septic Tank: EXISTING Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet 200ft + Linear Feet 90'-BED

No Lines 1 Trench Width 36" Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: GRAVITY CONVENTIONAL

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Bathrooms 2

☐ Business No. Employees ___

☐ Other _____

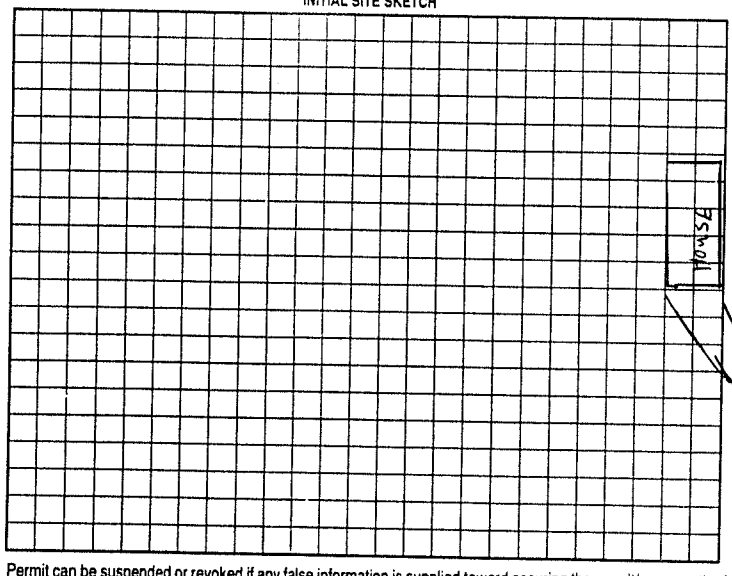
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

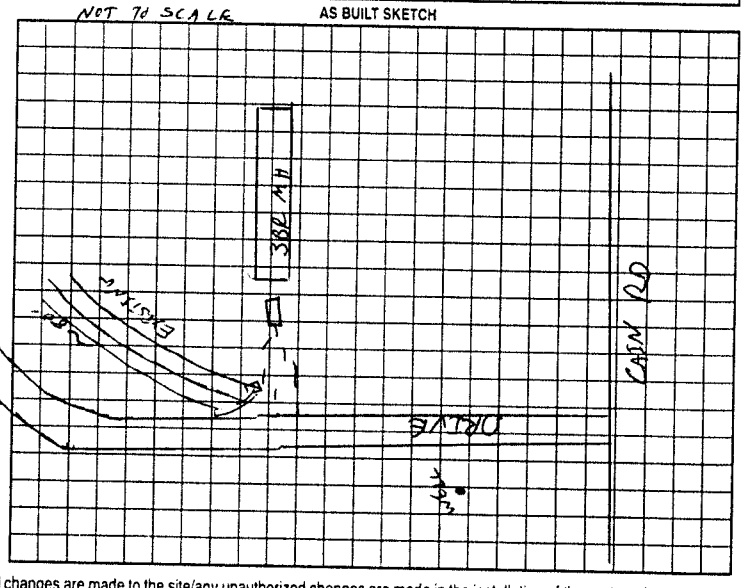
Comments:/Conditions:

Comments:/Conditions.

INITIAL SITE SKETCH



NOT TO SCALE AS BUILT SKETCH



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: Magdalene Cain date 6/6/00

Improvement Permit by: _____ date _____

Authorization to Construct by: _____ date _____

Installed by: KENNETH CHAFFIN / 1984

Operation Permit by: _____ date _____

Existing System Inspection by: C. Ky [illegible] VS date 6/6/00

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