IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 109213 PIN# 3793-11-6165 DATE 1/31/03

OWNER OR CONTRACTOR Steven Horton PHONE: Business — Home (704) 872-4910

ADDRESS 127 Sharon Ridge Lane, Statesville, N.C. 28677

LOCATION I-40 W, @ Sharon School, @ Sharon Ridge Lane, 4th lot on left.

SUBDIVISION Sharon Ridge BLOCK / SECTION — LOT 4 LOT AREA 1.0 Ac. SITE CLASS. 45 DESIGN FLOW 360 L.T.A.R. Expl.

Septic Tank: 1,000 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 36" Max Trench Bottom Depth — Gravel Depth 12"

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

System Description: Expl. Gravity, Conv.

Repair System Description: —

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

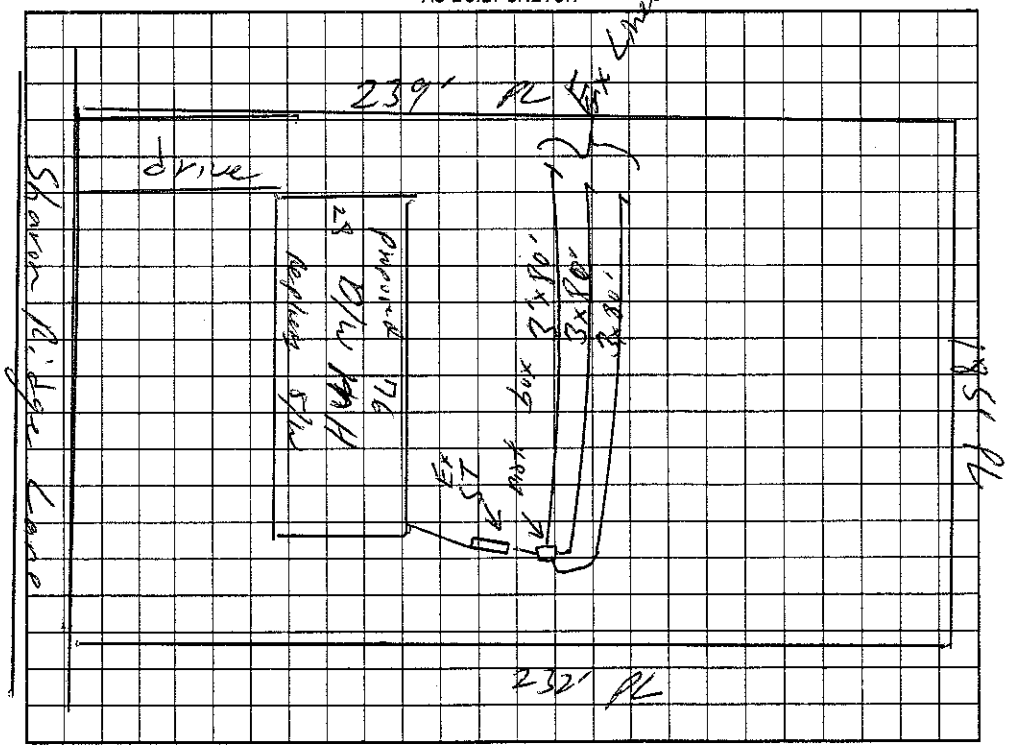
Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions:

Comments:/Conditions: - maintenance completed as requested. - System appears to be functioning properly at time of inspection. Replace existing skirting with blue mtl. Keep minimum 5ft from home to septic system

INITIAL SITE SKETCH

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: Steven Ray Horton date 1-31-03 Installed by: —

Improvement Permit by: — date — Operation Permit by: — date —

Authorization to Construct by: — date — Existing System Inspection by: William O. Johnson date 1/31/03

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