IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 093969 PIN# 3795 38 1811 DATE 1/26/01

OWNER OR CONTRACTOR JENKINS AND WILLIAMS PHONE: Business (704) 872-0922 Home

ADDRESS P.O. BOX 5877, STATESVILLE, NC 28687

LOCATION OLD MTN. RD. N, (R) ON STONEYDELL, 1ST LOT ON (R)

SUBDIVISION STONEYDELL BLOCK / SECTION 2 LOT 6 LOT AREA .76 Ac. SITE CLASS PS DESIGN FLOW 360GPD L.T.A.R. .35

Septic Tank: 1000 Gallons; STB 1012 Date 11-3-00

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 1020 Linear Feet 340'

No Lines 4 Trench Width 3' Max Trench Bottom Depth 28" Gravel Depth 12"

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

System Description: CONVENTIONAL

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☐ No

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

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

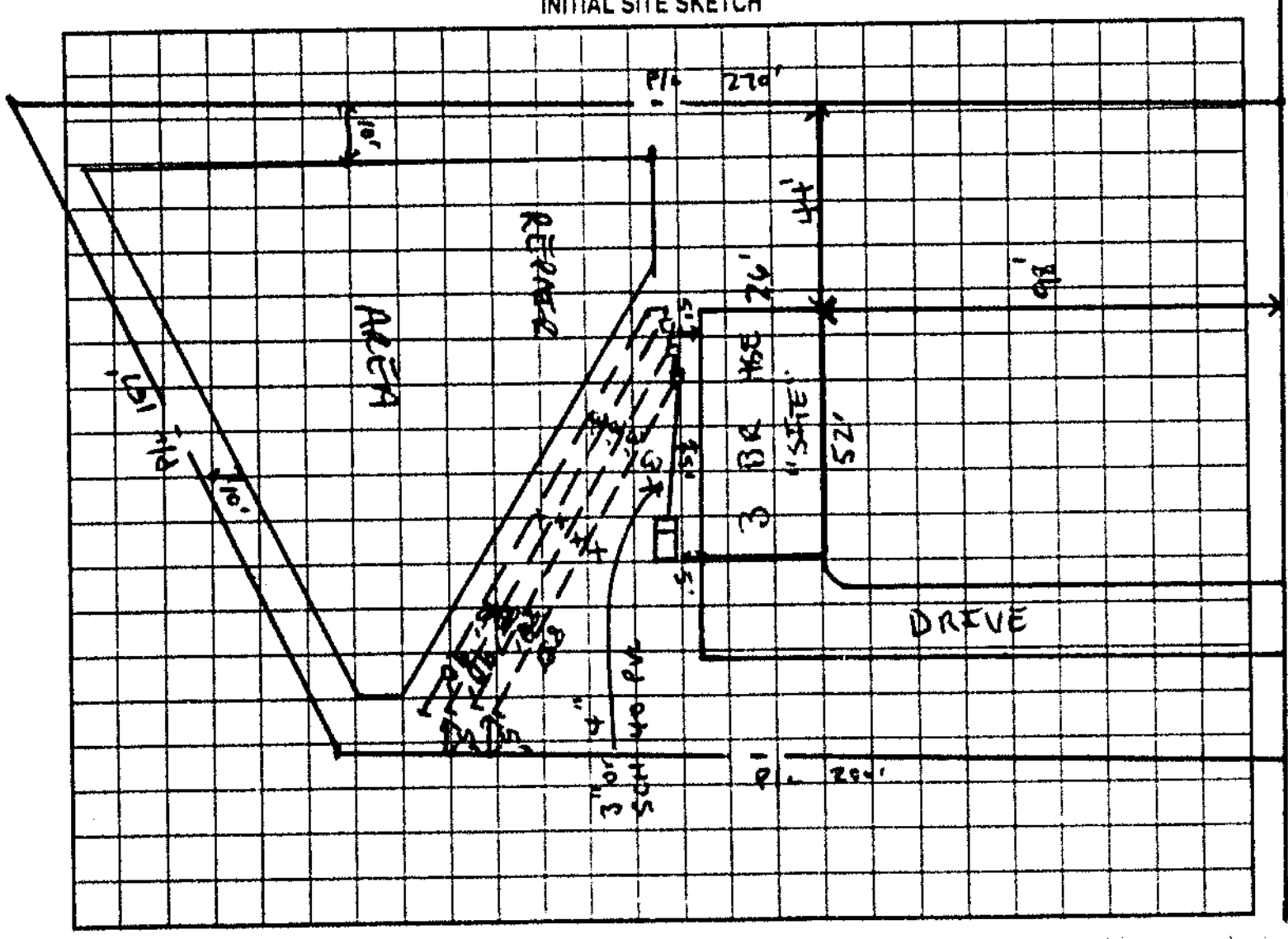
No. Bedrooms 3 No. Bathrooms 2 No. Employees

Water Supply: ☐ Individual ☑ Public ☐ Community

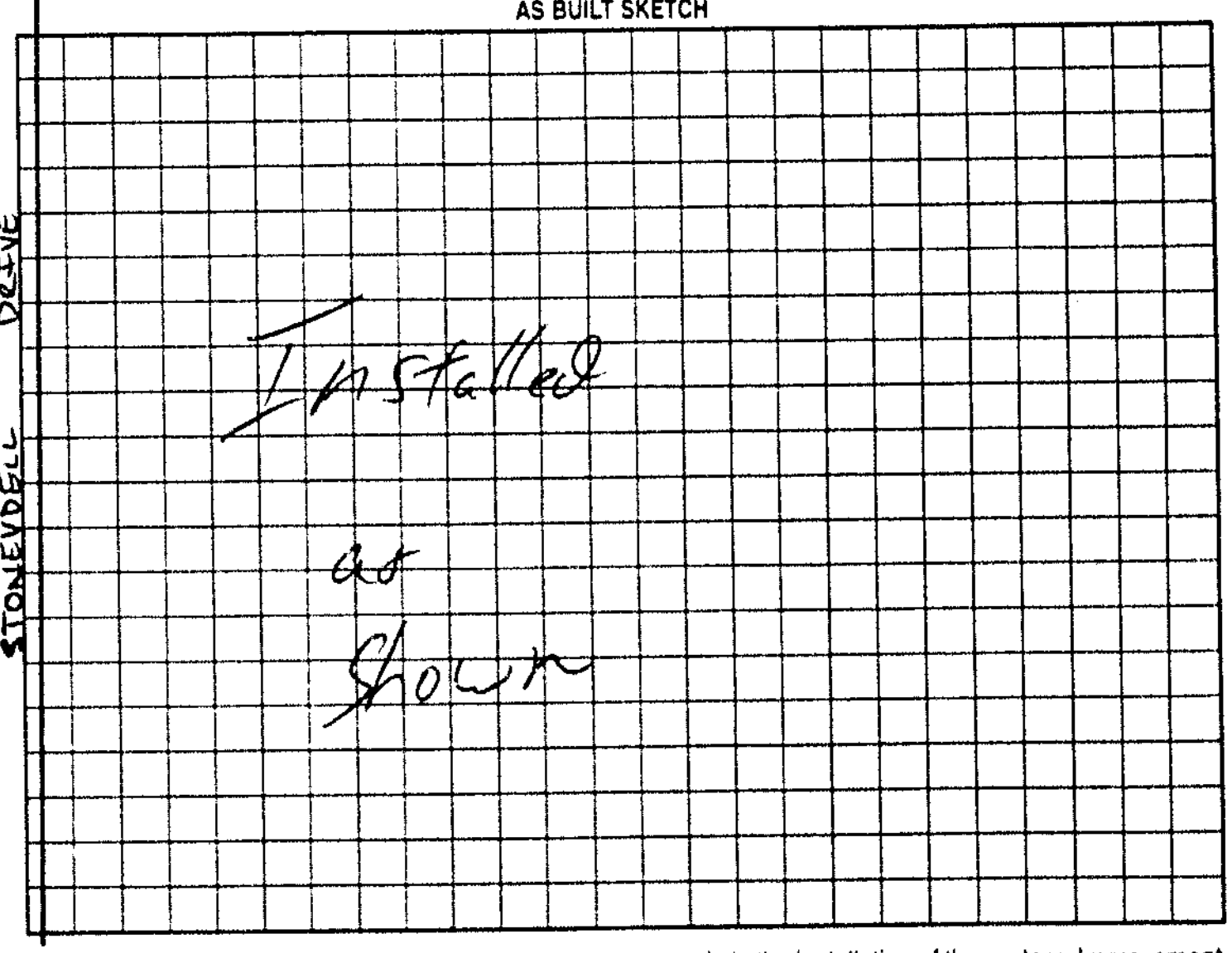
Comments/Conditions: (1) NO CUTTING OR FILLING OVER DRAINFIELD/REPAIR AREAS (2) KEEP ALL DRAINS AWAY FROM DRAINFIELD/REPAIR AREAS (3) MAINTAIN NOTED SETBACKS (4) INSTALL DRAINLINES UNIFORM AND ON CONTOUR MIN. 9' ON CENTER.

Comments/Conditions: - Septic Tank Marker Installed - Polylok Filter Installed

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: [signature] date 1/31/01 Installed by: Tommy Cothren

Improvement Permit by: [signature] date 1/26/01 Operation Permit by: [signature] RS date 2/26/01

Authorization to Construct by: [signature] date 1/26/01 Existing System Inspection by: date

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