IREDELL COUNTY HEALTH DEPARTMENT

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

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

DATE 3/15/01

PERMIT# 094805 PIN# 3795381811

OWNER OR CONTRACTOR Jenkins + Williams PHONE: Business (704) 872-0922 Home

ADDRESS P.O. Box 5877 Statesville N.C. 28687

LOCATION I-40 W, (R) on Mth Rd., (R) Stonydell, on right near end

SUBDIVISION Stonydell BLOCK / SECTION 2 LOT 8 LOT AREA 1.08 Ac SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1,000 Gallons, STB 1012 Date 3-3-01

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 3 @ 133' Trench Width 36" Max Trench Bottom Depth 30" Gravel Depth 12"

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

System Description: Gravity, Conventional

Repair System Description: Gravity, 25% Reduction

Maintenance Agreement Required: ☐ Yes X No

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

No. Bedrooms 3 No. Bathrooms 2 No. Employees

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

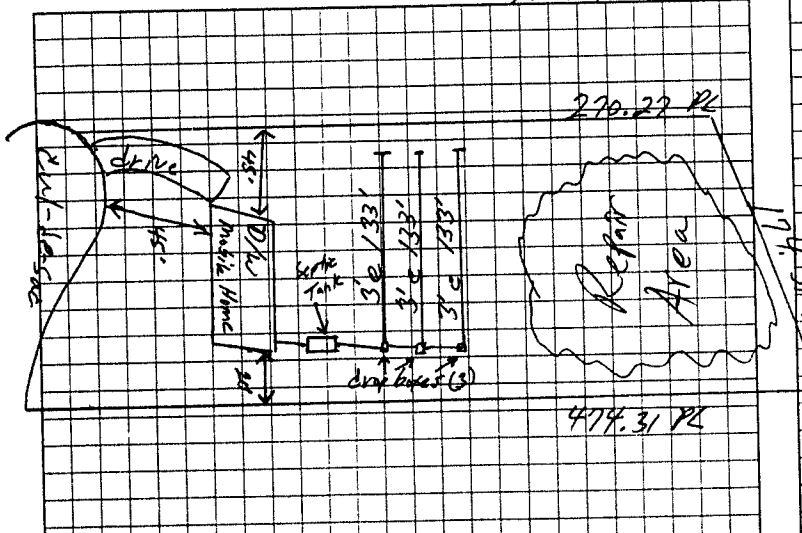
Water Supply: ☐ Individual X Public ☐ Community

Comments/Conditions: ① Do Not Install When Wet ② Install lines on Contour ③ Keep lines Off from property lines

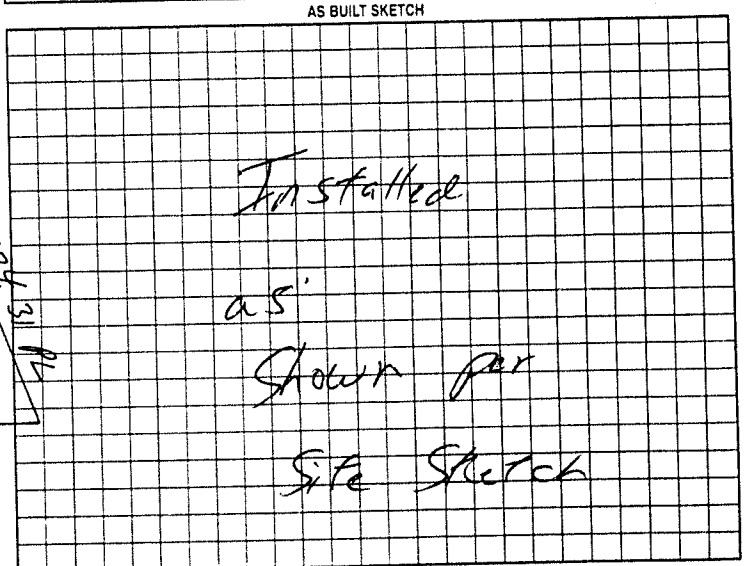
Comments/Conditions

Poly Lok Filter Installed
- Septic Tank Marker Installed

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: Tony W Jenkins date 3/16/01

Improvement Permit by: William O. Johnson RSI date 3/15/01

Authorization to Construct by: William O. Johnson RSI date 3/15/01

Installed by: Tommy Cothern

Operation Permit by: William O. Johnson date 6/11/01

Existing System Inspection by: date

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