IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

PERMIT# 107793 PIN# 3795-93-0166 DATE 8-17-05

OWNER OR CONTRACTOR James Frankle PHONE: Business Home 704-883-9572

ADDRESS ~~Hwy 90 Rd~~ PO Box 5158 Statesville NC 28687

LOCATION I 40 W. to Exit 150 (Old Mocksville Rd) to Massey Dean Rd (SR 1618) on L

SUBDIVISION BLOCK / SECTION LOT LOT AREA 4.7 SITE CLASS RS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1007 Date 9-26-05

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet ~~400~~ 300

No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12

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

System Description: Conven - Gravity

Repair System Description: Conven - Gravity

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms

☐ Business No. Employees

☐ Other

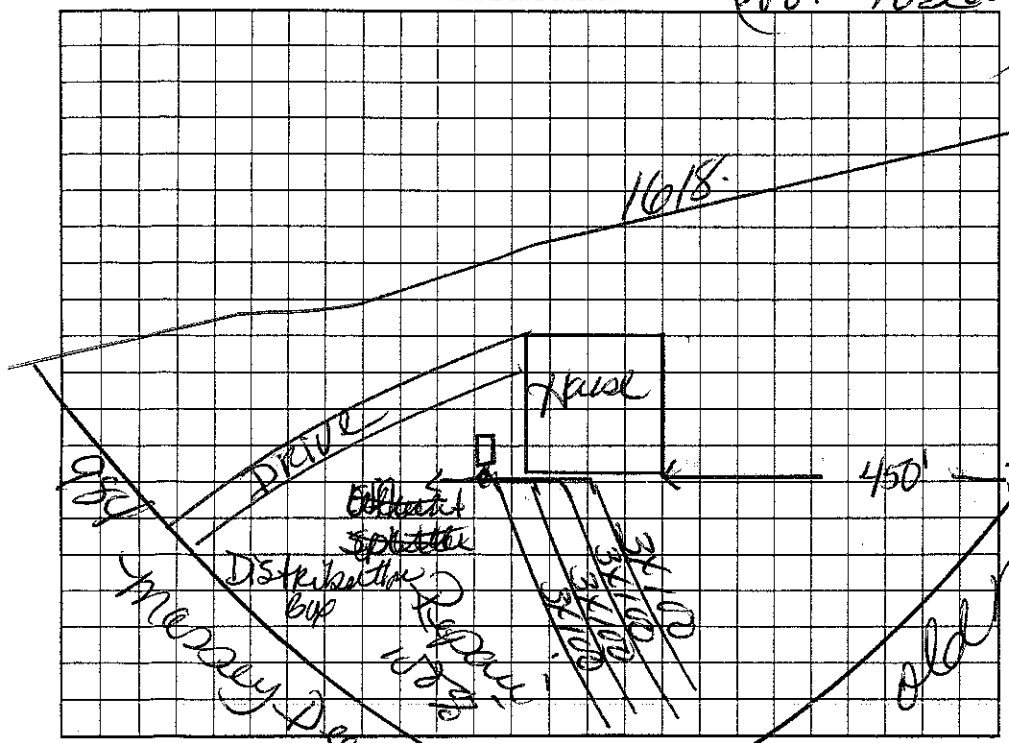
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

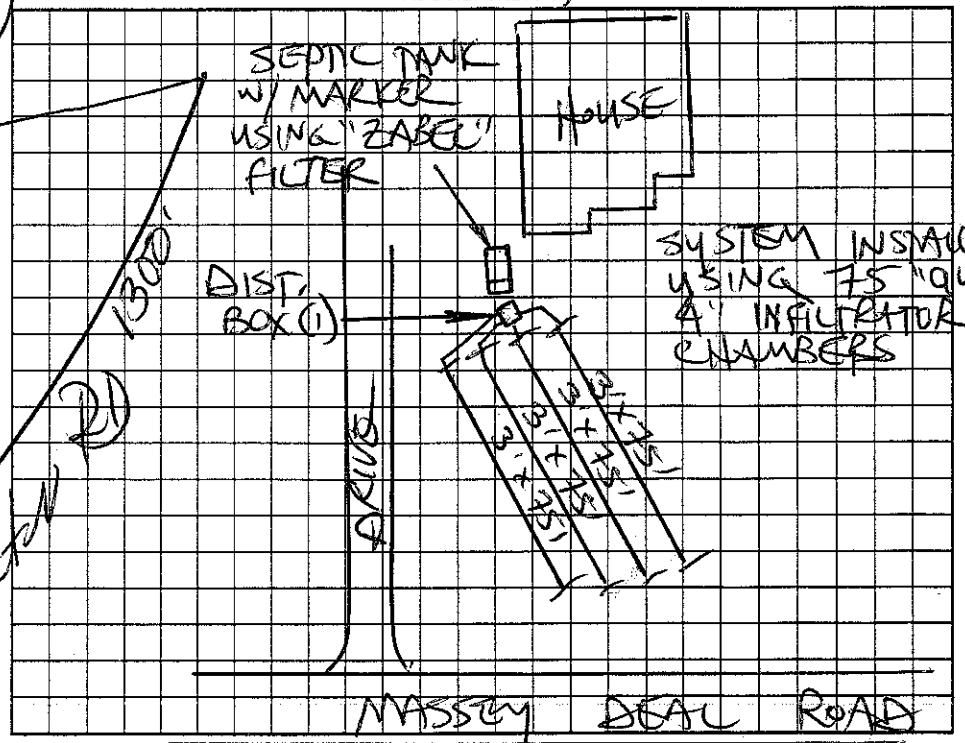
Comments:/Conditions: Install on Contour - Maintain Set Backs

Comments:/Conditions: Use ~~effluent splitter~~ (Zebal) DISTRIBUTION BOX Accepted System May also be used

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: date Installed by: TOMMY CONREN

Improvement Permit by: date 8-17-05 Operation Permit by: STEVE HENRICK date 12-2-05

Authorization to Construct by: date 8-17-05 Existing System Inspection by: date

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