IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089933 PIN# 4705050441 PT DATE 7-10-2000

OWNER OR CONTRACTOR Earlie Hager PHONE Business Home 876-3154

ADDRESS 524 Cove Gap Rd Statesville, NC 28625

LOCATION Hwy 64 TL Lippard Farm Rd TR Massey Dead TR Waugh Farm Rd at End

SUBDIVISION Ben's Estates BLOCK / SECTION LOT 2 LOT AREA .46 Acre SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 760 Date 5-1-00
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400'
No Lines 4 at 100'ea Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

[X] New System [ ] Repair System Type I II III IV V VI
System Description: Gravity - Conventional
Repair System Description: Gravity - Innovative
Maintenance Agreement Required [ ] Yes [X] No
[ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

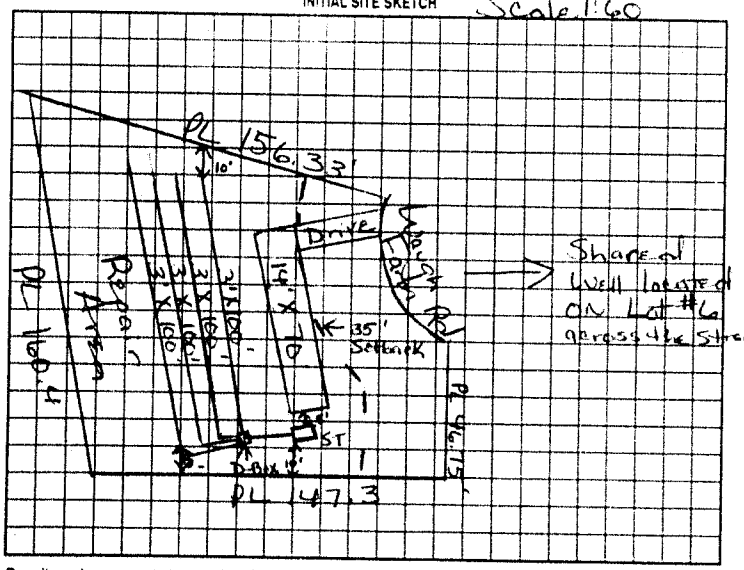
[ ] House/Mod. Home [X] Mobile Home [ ] Business [ ] Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees

Water Supply: [X] Individual Shared [ ] Public [ ] Community

Comments/Conditions: Keep Septic System at least 10' from PL, 5' from M.H. Install drainlines on contour.

Comments/Conditions

INITIAL SITE SKETCH Scale 1:60



AS BUILT SKETCH

Installed as shown

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: Earlie Hager date 7-11-2000 Installed by: Self.

Improvement Permit by: Marion H. Cotton RS date 7/10/2000 Operation Permit by: Mary C. Ott RS date 7-18-00

Authorization to Construct by: Marion H. Cotton RS date 7/10/2000 Existing System Inspection by: date

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