IREDELL COUNTY HEALTH DEPARTMENT

(C) Site address: 112 Fairchase Circle - Stony Point

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

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

PERMIT# 148345 PIN# 3796-96-9382

OWNER OR APPLICANT Clayton Homes of Statesville

ADDRESS 2626 Northside Drive Statesville, N.C. PHONE: Business 704-873-2547 Home

DATE 5 MARCH 08

LOCATION 112 Fairchase Circle / Lackey Farm Rd. Turn onto Cherry Blossom. 7R Sweet Cherry TL Fairchase ON RT.

SUBDIVISION BLOCK / SECTION LOT 45 LOT AREA 0.69 SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. 0.3 gpd/ft²

Septic Tank: 1000 Gallons: STB 760 Date 10-5-07

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 5120 Linear Feet 300

No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

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

System Description: 25% Reduction

Repair System Description: 25% Reduction

Maintenance Agreement Required: ☐ Yes ☑ No

☑ Gravity ☐ Pressure

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons

☐ Business No. Employees

☐ Other

Water Supply: ☑ Individual ☐ Public ☐ Community

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

Comments:/Conditions:

Follow contour

Honor well setback requirements.

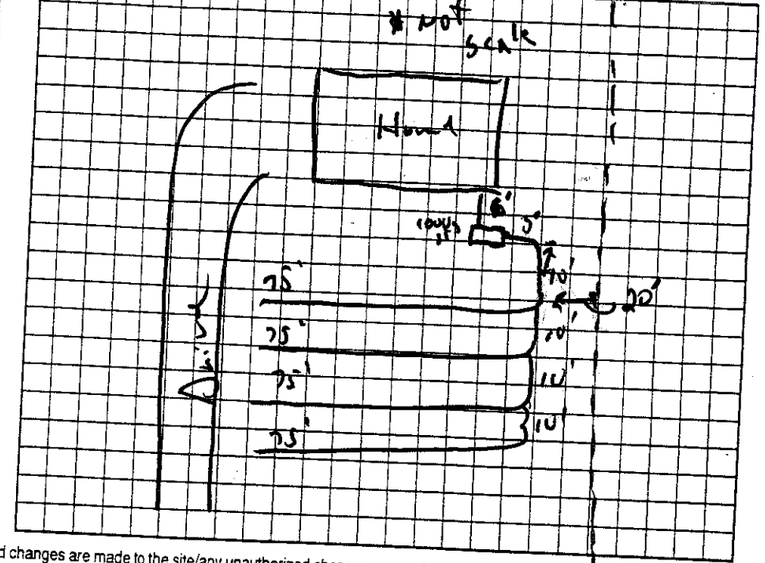
Comments:/Conditions: Filter install

INITIAL SITE SKETCH

Please Find Attached site plan

AS BUILT SKETCH

* not to scale



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:

Improvement Permit by: , R.S. date 3-6-08

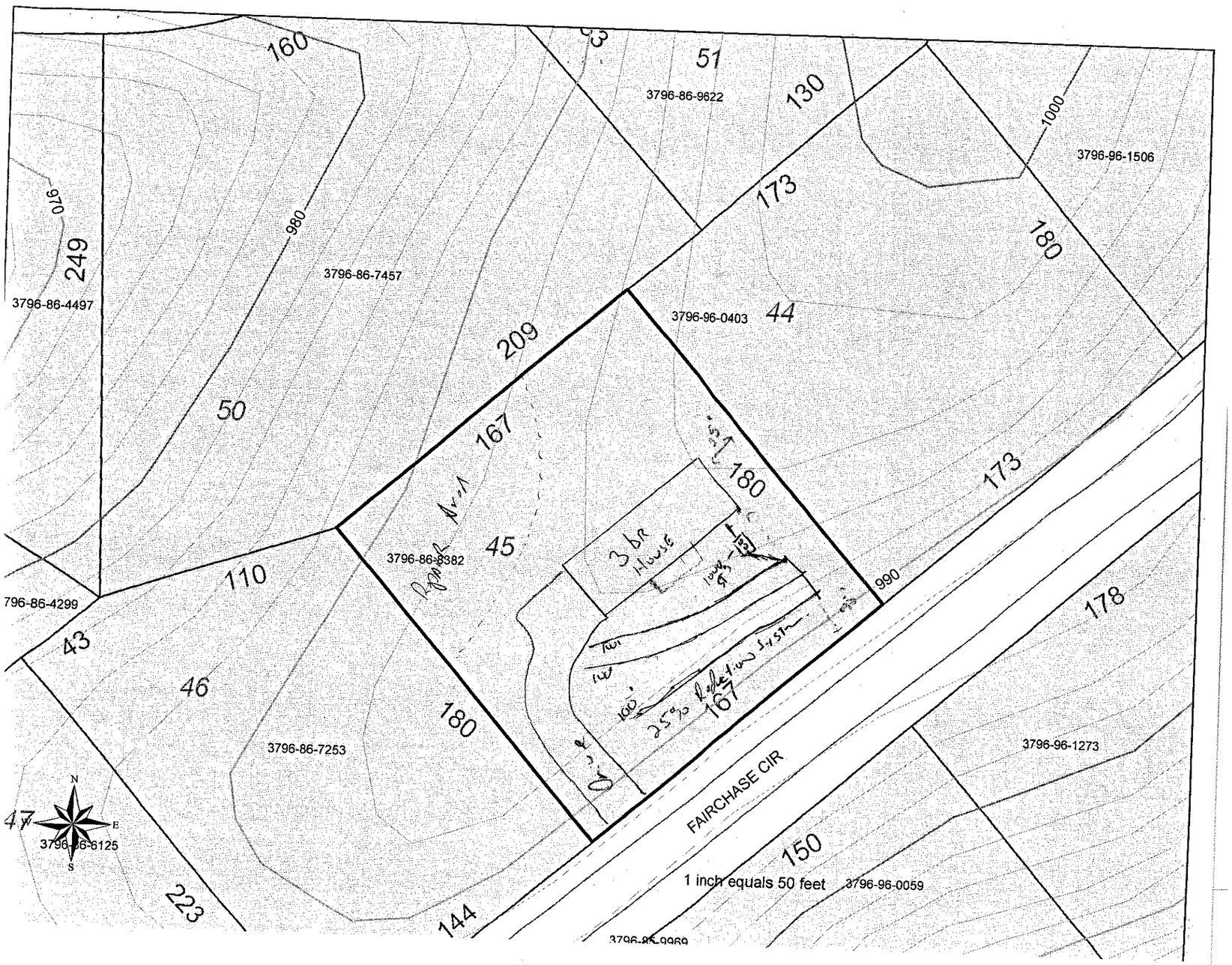
Authorization to Construct by: , R.S. date 5 March 08

Installed by: Tim Alge

Operation Permit by: , R.S. date 11 March 08

Existing System Inspection by: date

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


160
51
3796-86-9622
130
1000
3796-96-1506
970
980
249
3796-86-7457
173
180
3796-86-4497
209
3796-96-0403
44
50
167
45
180
3796-86-8382
3 BR House
110
990
173
796-86-4299
43
46
180
167
3796-86-7253
178
3796-96-1273
FAIRCHASE CIR
47
3796-86-6125
150
1 inch equals 50 feet
3796-96-0059
223
144
3796-86-9969
N
S
E
W