IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089193 PIN# 379752 3613 (pt) DATE May 22, 00

OWNER OR CONTRACTOR Jane Lee PHONE: Business 876-2926 Home

ADDRESS 4738 LAKESIDE DR. CLAIRMONT N.C. 28607

LOCATION 64 WEST TR Lackey Farm Rd. TR PLANK BARN RD TO END - onto gravel drive on Right

SUBDIVISION Gordon Acres BLOCK / SECTION LOT 2 LOT AREA .86ac SITE CLASS PS DESIGN FLOW 360gpd W.A.R. 3

Septic Tank: 1000 Gallons; STB 1012 Date 2 7 00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

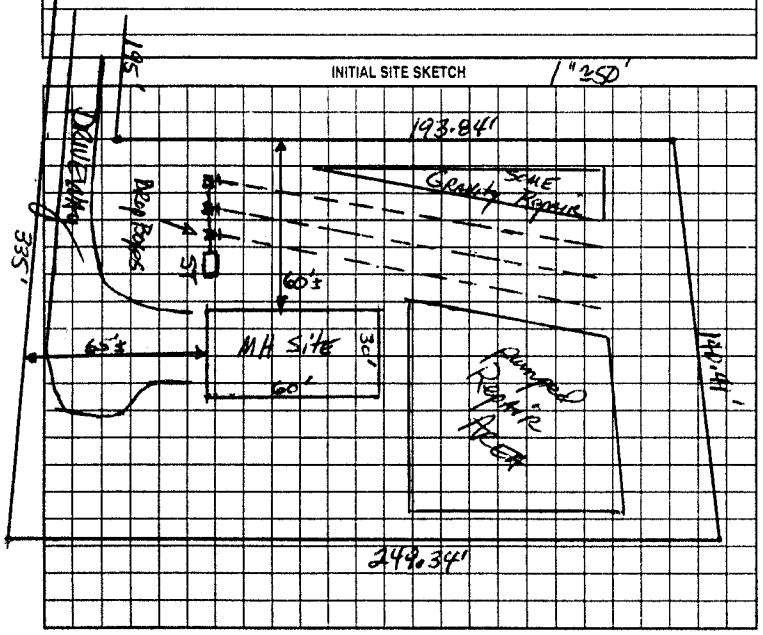
☑ New System ☐ Repair System Type: I II III IV V VI
System Description: Gravity Conventional
Repair System Description Gravity/pumped conventional
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

INITIAL SITE SKETCH 1"=50'



Comments:/Conditions

AS BUILT SKETCH

System installed
Designed

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 5-31-00 Installed by: Al Backhoe

Improvement Permit by: date 5-22-00 Operation Permit by: date June 6 00

Authorization to Construct by: date 5-22-00 Existing System Inspection by: date

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