East

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 10211 PIN# 4626 22 1598 DATE 9/6/2001

OWNER OR CONTRACTOR Craig Corey PHONE: Business Home

ADDRESS 18801 River Falls Dr Davidson, NC 28036

LOCATION 191 Indian Trail — Brawley School Rd TR Chuckwood TR Indian Trail on left

SUBDIVISION Lot BLOCK / SECTION 7 LOT LOT AREA 44 SITE CLASS. PS DESIGN FLOW 240gpd T.A.R.

Septic Tank: Existing Gallons STB Date

Pump Tank: Gallons PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet

No Lines Trench Width Existing Max Trench Bottom Depth Gravel Depth

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

System Description: Existing Gravity Conventional

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

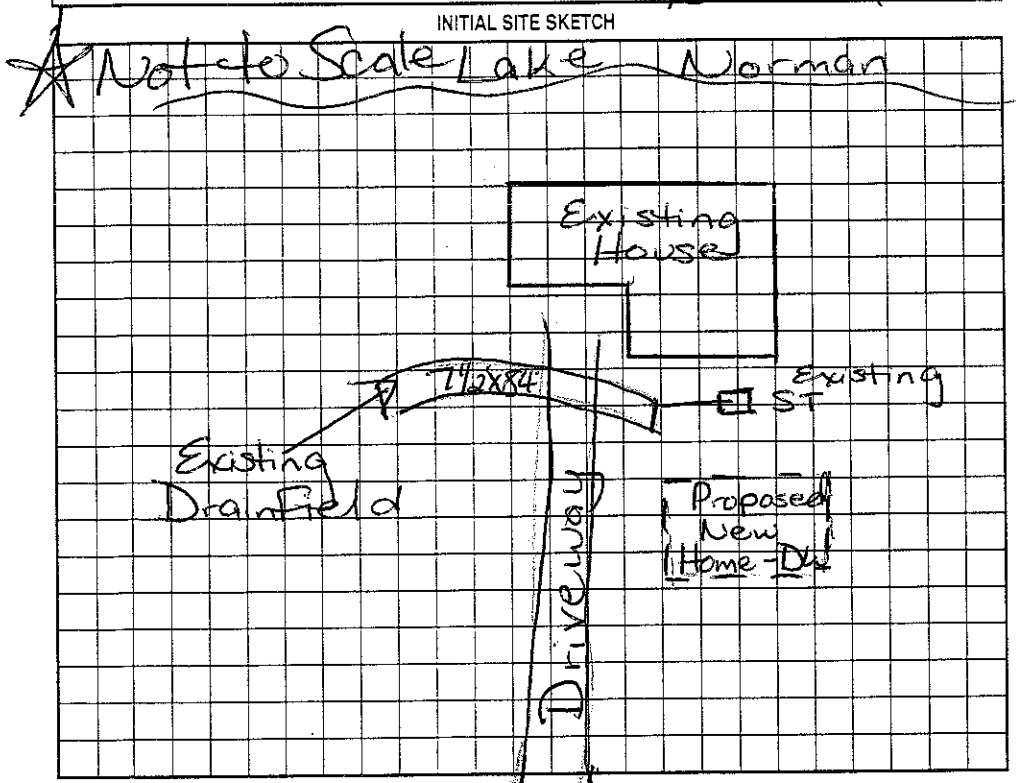
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

Comments:/Conditions: Existing Septic System appears to be functioning okay at time of inspection. No problems noticed.

Comments:/Conditions: Keep New home at least 5' from Septic System

INITIAL SITE SKETCH



AS BUILT SKETCH

Septic System originally installed 1975 for - Charlie Caldwell (attached)

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: Craig Corey date 6 Sept 01 Installed by:

Improvement Permit by: Maria H. Dotson RS date 9/6/2001 Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: Maria H. Dotson RS date 9/6/2001

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