IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 84101 PIN# 4627781661 DATE Jan 4, 2000

OWNER OR CONTRACTOR Robert Mann PHONE. Business 7043920898 Home

ADDRESS

LOCATION Perth Rd @ Wildlife Rd Lot on Right just past old IR Wildlife & Game

SUBDIVISION BLOCK / SECTION 18 LOT 119 LOT AREA SITE CLASS B DESIGN FLOW 360 L.T.A.R. .33

Septic Tank: 1000 Gallons; STB 1012 Date 10/12/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1090 Linear Feet 190
No Lines 2 Trench Width 24" Max Trench Bottom Depth 36" Gravel Depth N/A

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: Gravity T+L Panel SJ.
Repair System Description: Pump LPA Rel.
Maintenance Agreement Required: ☐ Yes ☒ No

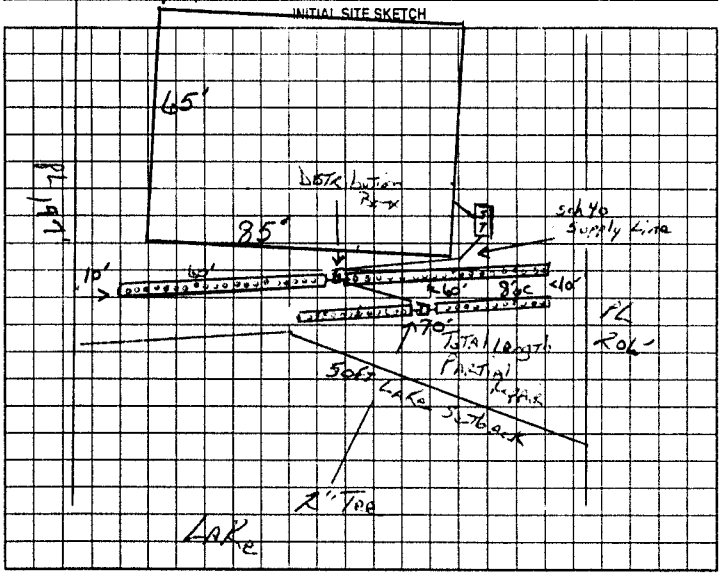
☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other
☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

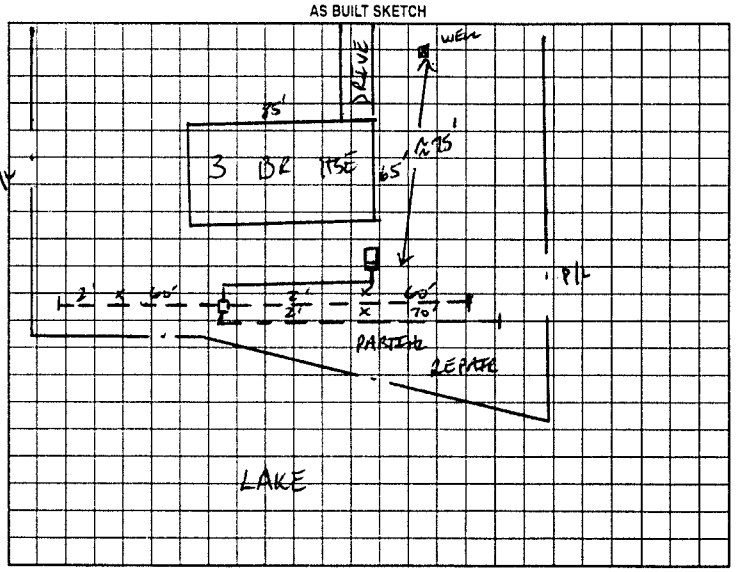
Comments:/Conditions: ~~2 Drop Boxes~~ Distribution Box w/ Speed Leveler
Install on Contour
Do Not Cross 50ft Lake Setback
Pump Pit Area ☒ well

Comments /Conditions:
To A 2" Tee To Allow for equal Distribution

INITIAL SITE SKETCH



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: Robert L. Mann date 1-5-00 Installed by: Statesville Backhoe

Improvement Permit by: J.C. Potter date Jan 4 2000 Operation Permit by: Danny Shinn date 4/18/01

Authorization to Construct by: J.C. Potter date Jan 4 2000 Existing System Inspection by: date

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