IREDELL COUNTY HEALTH DEPARTMENT

AUTHORIZATION TO CONSTRUCT

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

12:00

IMPROVEMENT PERMIT / ~~CERTIFICATE OF COMPLETION~~ / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 23537 DATE 4/25/97 TAX MAP NO. 2P-P.5 Watershed: ☐ Yes ☐ No

OWNER OR CONTRACTOR PERRY JENKINS ~~PHONE: Business~~ PIN#4637-68-9092 Home

ADDRESS 2141 OLD MT. RD STATESVILLE NC 28677

LOCATION 150 W. OF KENDRA DR. 6TH LOT ON RT

SUBDIVISION DOLLIE MEADOWS BLOCK / SECTION LOT 5 LOT AREA 34993 ft² SITE CLASS. D S DESIGN FLOW 360 GPD L.T.A.R. .36 /FT

Septic Tank: 1000 Gallons; STB 1012 Date 2/7/97

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 5 @ 60 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

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

System Description: GRAVITY CHAMBERED

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☑ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

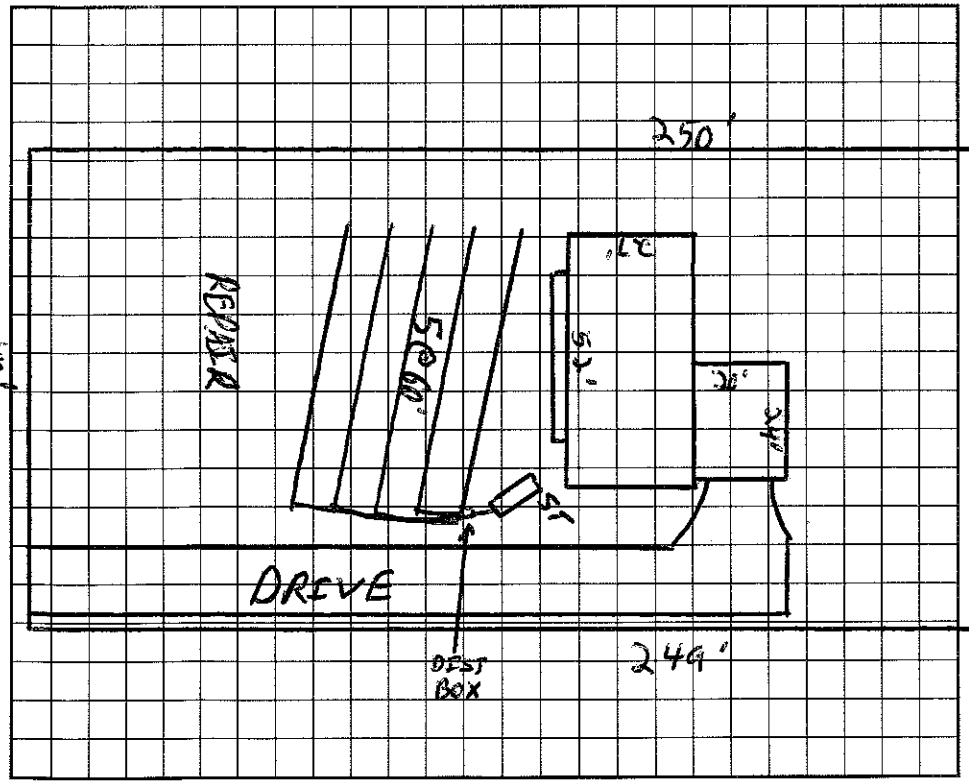
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Community ☐ Public

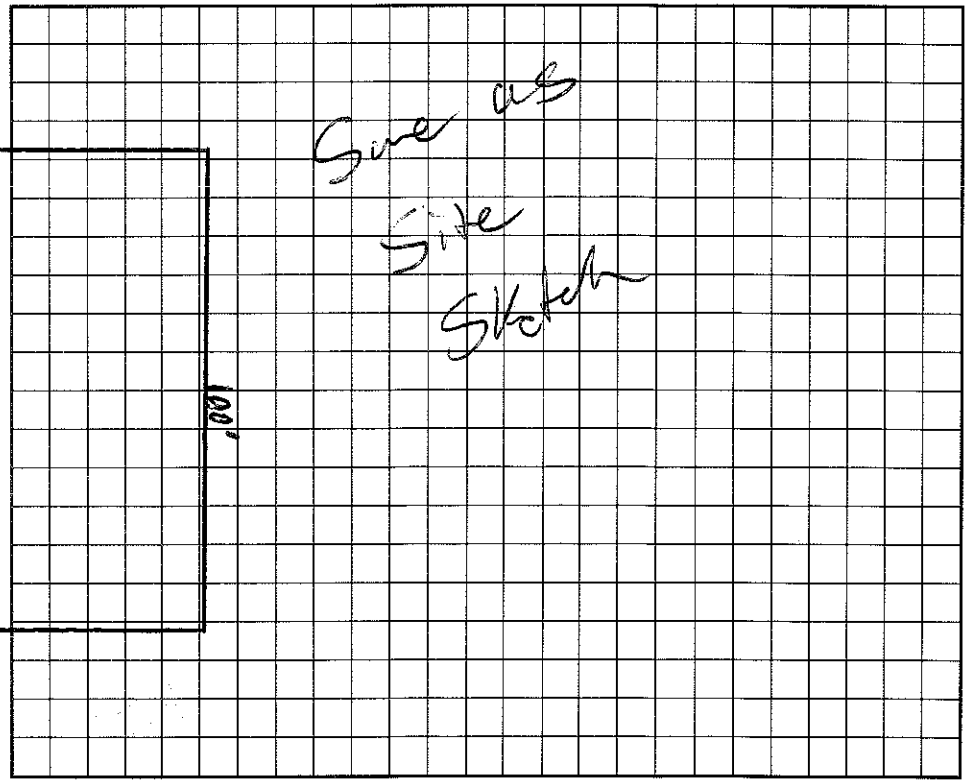
Comments:

Comments:

INITIAL SITE SKETCH



AS BUILT SKETCH



I understand that this 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 is valid for 60 months from date of issuance.

Signed: Perry W Jenkins

Installed by: TOMMY FRYE

Improvement Permit by: C. Ray Foster date 4/25/97

Certificate of Completion by: date

~~Existing System Inspection by:~~ AUTHORIZATION TO CONSTRUCT C. Ray Foster date 4/28/97

Operation Permit by: C. Ray Foster date 5/2/97

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