IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 74940 PIN# 4638 249670 DATE 4/1/99

OWNER OR CONTRACTOR GREGORY MELVIN PHONE: Business _____ Home _____

ADDRESS 326 W STEWART AVE MOORESVILLE 28115

LOCATION PEETH TL NORMANDY - TR KEENAN - AT END

SUBDIVISION CL&T BLOCK / SECTION 11 LOT 105 LOT AREA — SITE CLASS. B5 DESIGN FLOW 360 L.T.A.R. —

Septic Tank: _____ Gallons: STB _____ Date _____
Pump Tank: EXISTING Gallons: NT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields ___ Square Feet _____ Linear Feet _____
No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

☐ New System ☐ Repair System Type: I II III, IV, V, VI
System Description: GRAVITY CONVENTIONAL
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☐ No

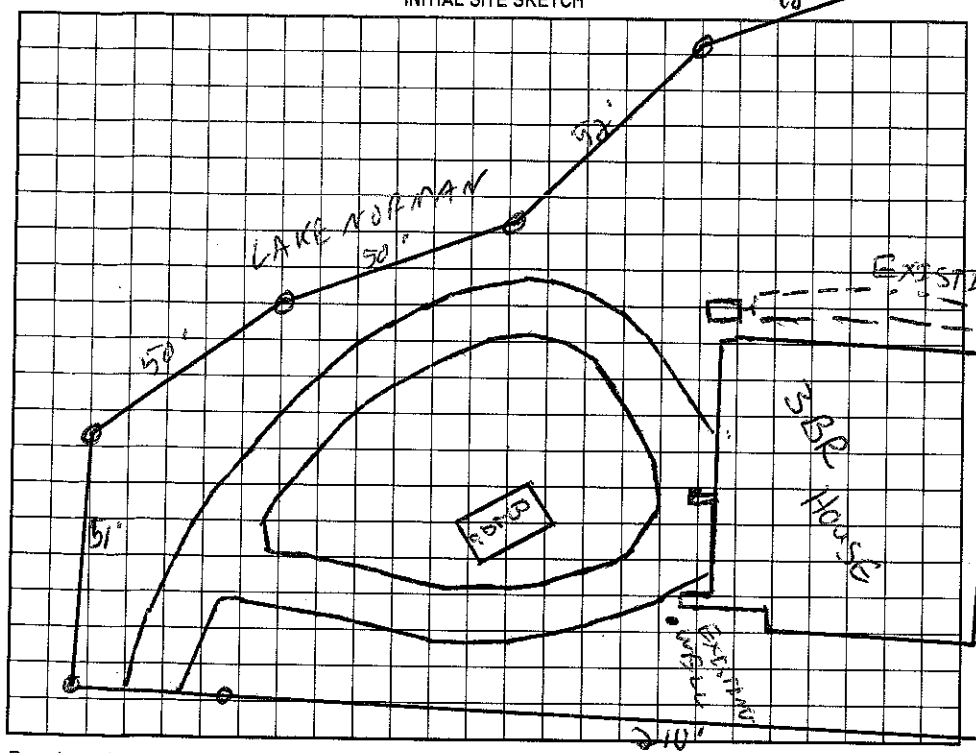
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees ___
☐ Other _____
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☑ Individual
☐ Public
☐ Community

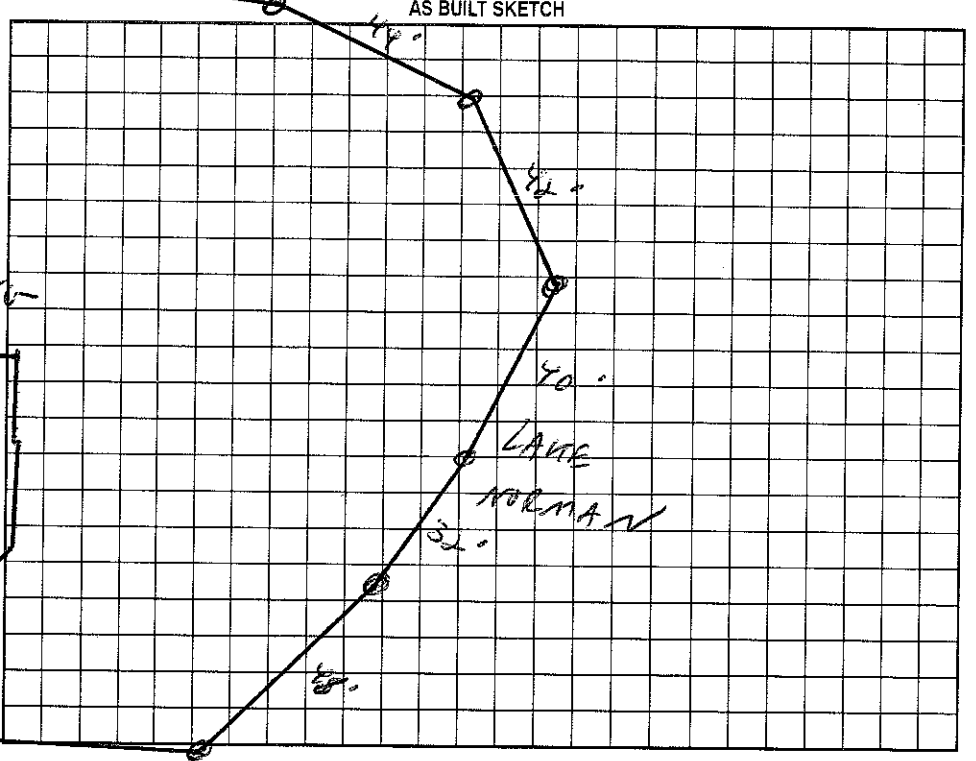
Comments:/Conditions: 1"=40'

Comments:/Conditions:

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: _____ date 4/12/99 Installed by: _____

Improvement Permit by: C. _____ RS date 4/1/99 Operation Permit by: _____ date _____

Authorization to Construct by: C. _____ RS date 4/1/99 Existing System Inspection by: C. _____ RS date 3/7/00

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