(9:30)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 076500 PIN# 4649284193 DATE 9/25/98

OWNER OR CONTRACTOR Harreye. Stephanie Turner PHONE: Business 878-8683 Home 528-0343

ADDRESS 116 Torrence Ave Troutman, NC 28166

LOCATION Caryle Rd to Jasmine Circle TL Torrence Ave 1st mH on right

SUBDIVISION King Acres BLOCK / SECTION _____ LOT 8 LOT AREA ~26,000 FT2 (Addition) SITE CLASS. _____ DESIGN FLOW 360gpd L.T.A.R. _____

Septic Tank: 1000 Gallons; STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields 1 Square Feet 225' Linear Feet 75'

(Addition to Existing Field) No Lines 1 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 - 25% Reduction

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3

☒ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

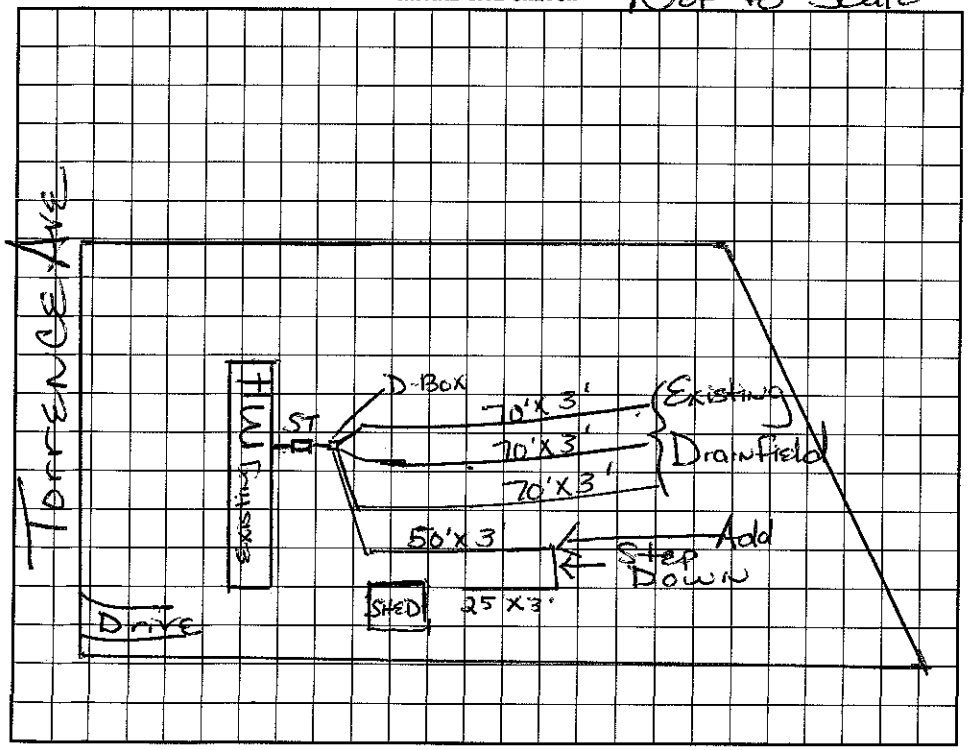
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☒ Community

Comments:/Conditions: Upgrading from 2 Bedroom to 3 Bedroom Need to add Drainline(s) 1 line 50'x3' & 1 line 25'x3' = 75' Total Added

Comments:/Conditions:

INITIAL SITE SKETCH Not to Scale



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 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: Harreye Turner III date 9/25/98

Improvement Permit by: Marian H. Dotson RS date 9/25/98

Authorization to Construct by: Marian H. Dotson RS date 9/25/98

Installed by: A1 Backhoe

Operation Permit by: _____ date 10/13/98

Existing System Inspection by: _____ date _____

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