IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 5812 MOORESVILLE PIN# 4677441091 DATE 10/1/98

OWNER OR CONTRACTOR JONATHAN TILLEY PHONE: Business _____ Home 663-1908

ADDRESS 144 VANDALIA · MOORESVILLE NC 28115

LOCATION 150/152 JUCTION - TR ALEXANDER ACRES #299 ON LT NEAR END

SUBDIVISION CANDELL EST BLOCK / SECTION _____ LOT 2 LOT AREA 4.82AC SITE CLASS. PS DESIGN FLOW 360GPD L.T.A.R. 36GPD/FT

Septic Tank: 1000 Gallons; STB 794 Date 7/9/98
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

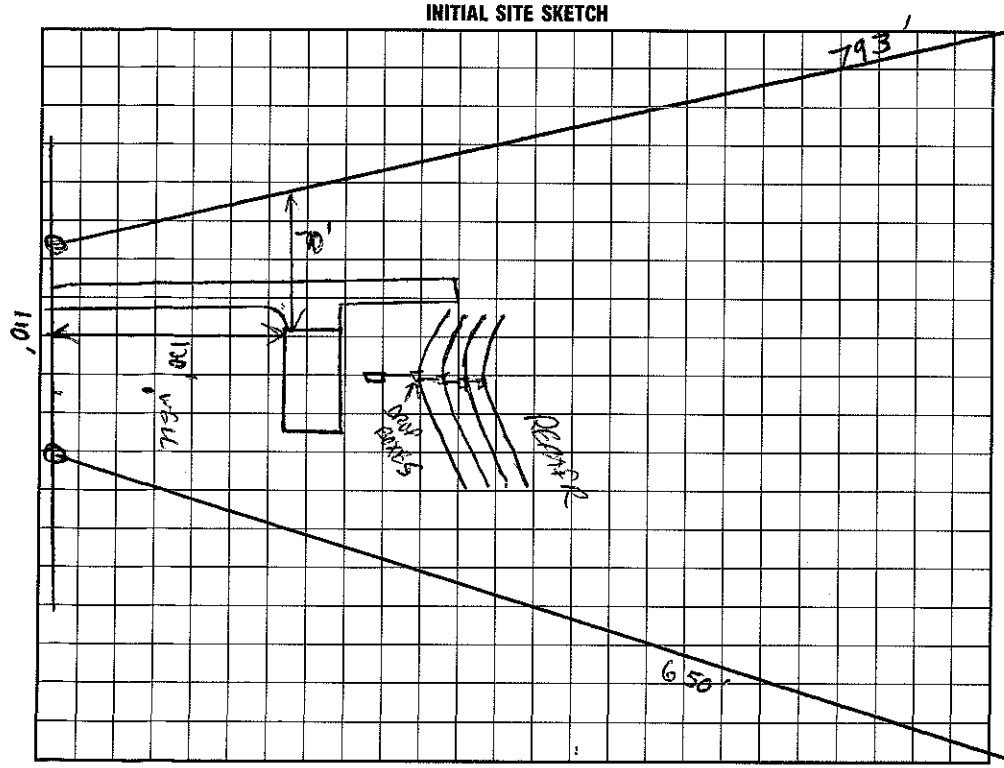
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☐ Crawl Space ☑ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☑ Individual ☐ Public ☐ Community

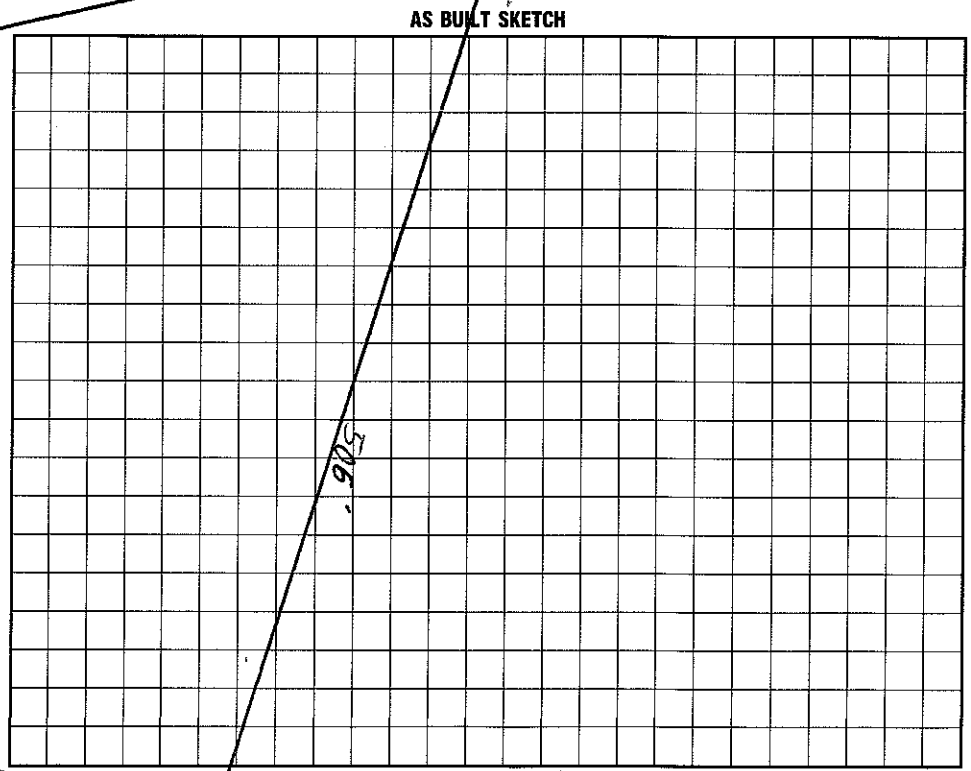
Comments:/Conditions:

Comments:/Conditions:

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 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: Sara J. Tilley date 10/2/98

Improvement Permit by: C. Wayne Thomas RS date 10/1/98

Authorization to Construct by: C. Wayne Thomas RS date 10/1/98

Installed by: ORBISON

Operation Permit by: C. Wayne Thomas date 11/16/98

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