IREDELL COUNTY HEALTH DEPARTMENT

CI THIS PERMIT REPLACES PREVIOUS ISSUED 2-23-01

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

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

PERMIT# 093893 PIN# 4702-85-5081 3493 DATE 6-17-03

OWNER OR CONTRACTOR FLEETWOOD HOMES of STATESVILLE PHONE: Business % 704-400-7019 Home

ADDRESS 109 DESIREE DR, STATESVILLE, NC 28677

LOCATION US 70 WEST TL EUFOLA ROAD, TR DESIREE DRIVE 4th LOT ON RIGHT

SUBDIVISION SHENANDOAH BLOCK / SECTION LOT 16 LOT AREA 1.274 ACRES SITE CLASS. RS DESIGN FLOW 480 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 1012 Date 1-10-03

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 640 1600 Linear Feet 400

No Lines FOUR 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: 25% REDUCTION GRAVITY

Repair System Description: 25% REDUCTION PUMP

Maintenance Agreement Required: ☐ Yes ☑ No 1/CENTURY

☐ House/Mod. Home ☑ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 2 No. Employees

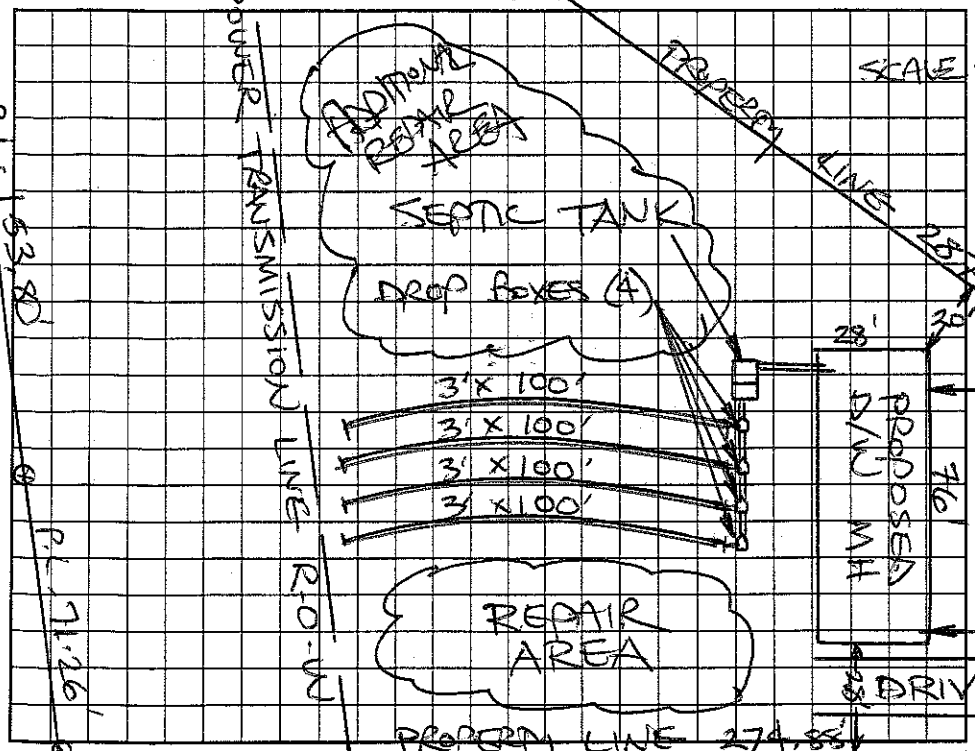
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

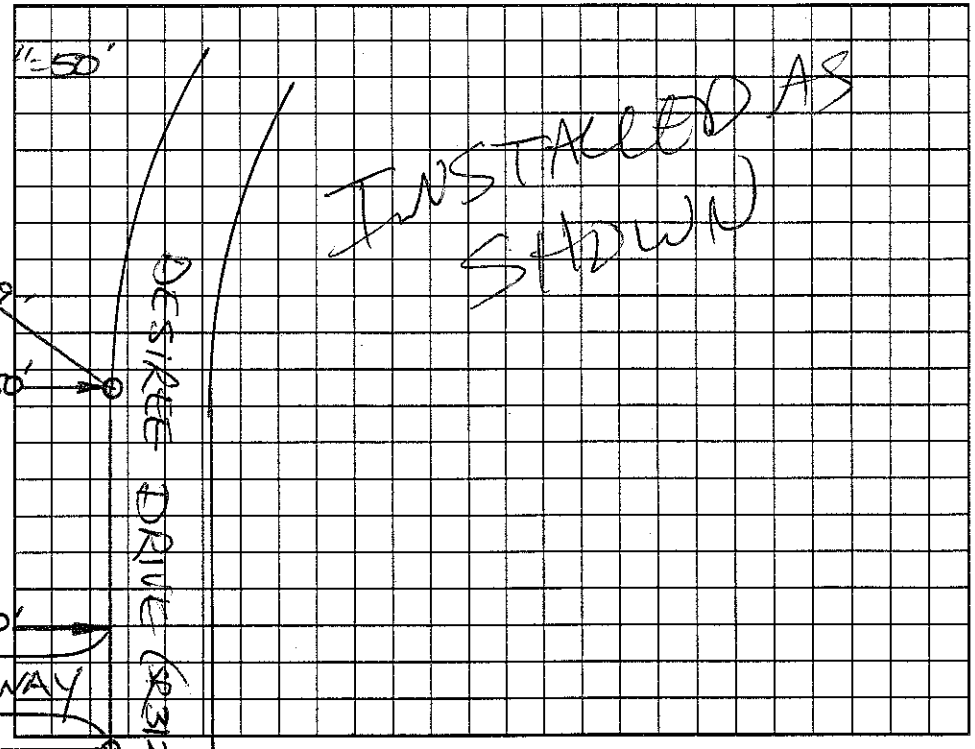
Comments/Conditions: ① INSTALL 25% REDUCTION SYSTEM ON CONTOUR - FLAG EACH LINE ON CONTOUR AFTER CLEARING ② THIS PERMIT REPLACES PREVIOUS ISSUED 2-23-01

Comments/Conditions: TUFF TITE FILTER & MARKER

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 6/18/03 Installed by: CRAIG THOMPSON

Improvement Permit by: STEVE HEDRICK date 6-17-03 Operation Permit by: _____ date 7-11-03

Authorization to Construct by: STEVE HEDRICK date 6-17-03 Existing System Inspection by: _____ date _____

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