# IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 140885 PIN# 4703-02-7754 DATE 13 March 07

OWNER OR APPLICANT Complete Home Remodeling Services PHONE: Business 864-233-6441 Home

ADDRESS 351 Pine Forest Dr. Extension Greenville, SC

LOCATION 3639 Hickory Hwy Statesville, NC

SUBDIVISION Meadow Creek BLOCK / SECTION 1 LOT 3 LOT AREA 0-7 Ac. SITE CLASS. P3 DESIGN FLOW 360gl. 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 1200 Linear Feet 300

No Lines 4 Trench Width 36 Max Trench Bottom Depth Gravel Depth ☑ Gravity ☐ Pressure

☐ New System ☐ Repair ☐ Expansion System Type I II III IV V VI

System Description: 25% Reduction

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 3

☑ Mobile Home No. Persons

☐ Business No. Employees

☐ Other

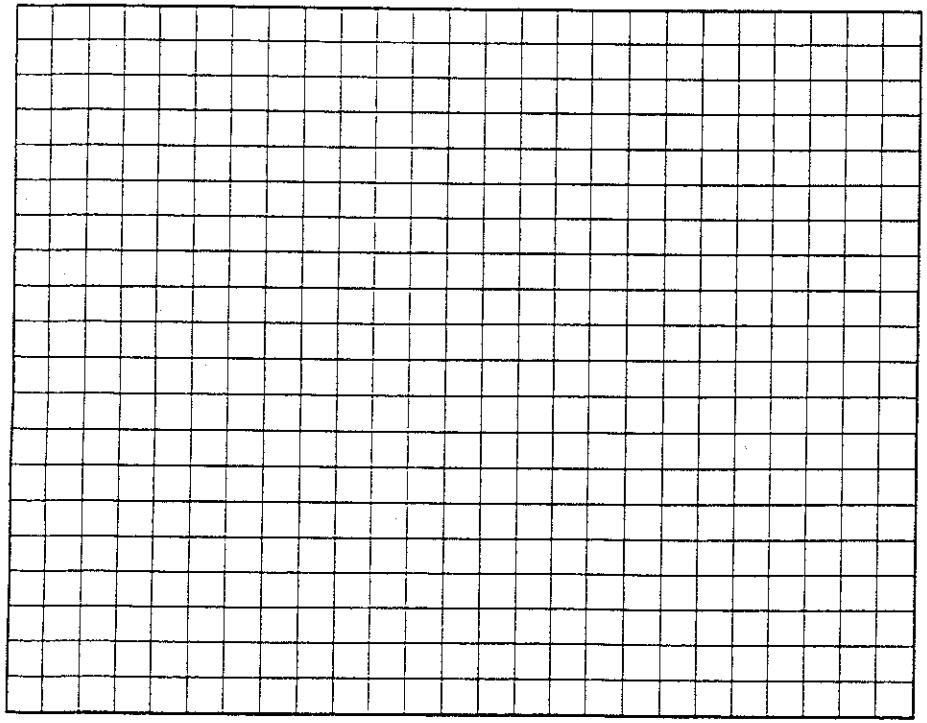
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

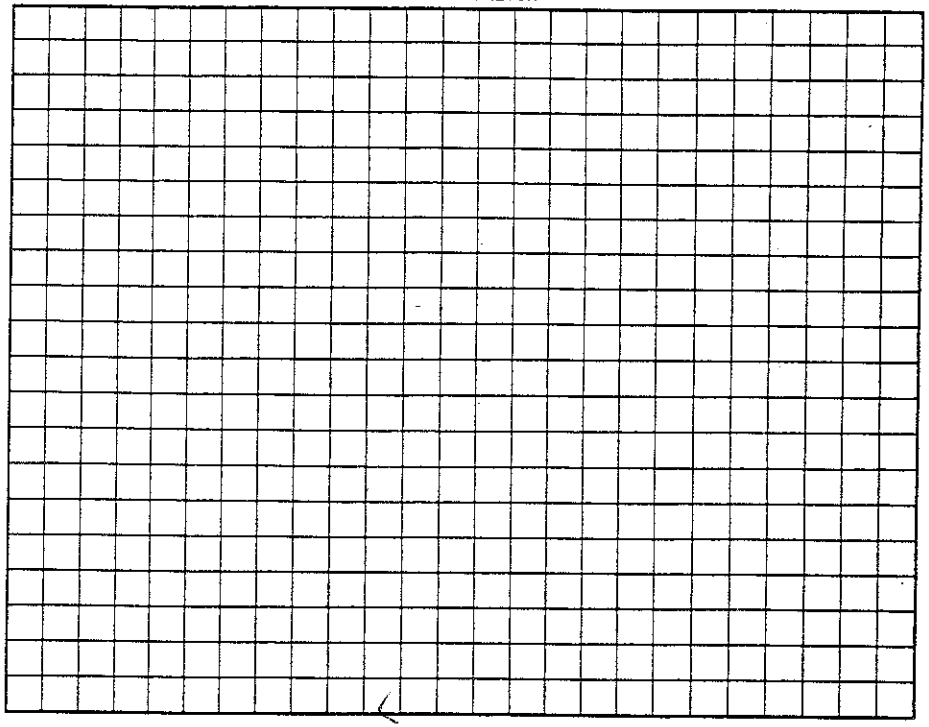
Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



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

Improvement Permit by: date

Authorization to Construct by: date

Installed by:

Operation Permit by: date

Existing System Inspection by: R.S. date 13 March 07

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