IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 88039 PIN# 4703961412 DATE March 14, 2000

OWNER OR CONTRACTOR Scottie Feimster PHONE: Business _____ Home 873 5439

ADDRESS 123 Lambert Lane Statesville

LOCATION Hwy 70 W ⓛ Holman ⓡ Lambert Lot on Right

SUBDIVISION Shiloh Acres BLOCK / SECTION _____ LOT 73-76 LOT AREA .36 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 1012 Date 8-1-99

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 36"

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: Gravity 20% Reduction

Repair System Description: Pump 50% Reduction

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth N/A ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

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

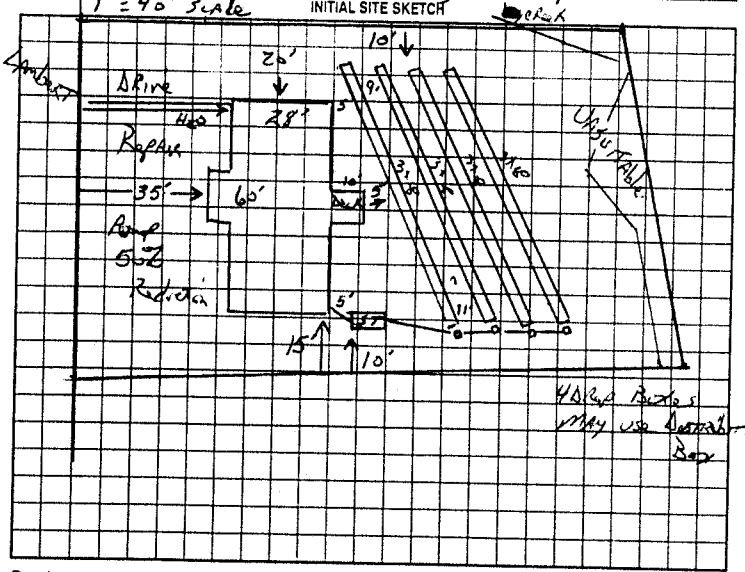
No. Bedrooms 3 No. Bathrooms 2 No. Employees _____

Water Supply: ☐ Individual ☒ Public ☐ Community

Comments/Conditions: INSTALL ON CONTOUR 50 CHAMBERS OR 30 HDS SECTIONS. HOME MUST BE LOCATED AT FRONT 35' SETBACK STAY OUT OF DEPRESSED AREA W/ SEPTIC SYSTEM. NO DRIVING/PARKING OR BUILDING OVER SEPTIC FIELD.

Comments/Conditions:

1" = 40' SCALE INITIAL SITE SKETCH



AS BUILT SKETCH

Installed as shown

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: Scottie Feimster date 3-15-00 Installed by: A-1 Backhoe

Improvement Permit by: J. C. Potter date March 14 2000 Operation Permit by: [illegible] date 5-16-00

Authorization to Construct by: J. C. Potter date March 14 2000 Existing System Inspection by: _____ date _____

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