Rachel Pearce

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 125157 PIN# 4704-59-8493 DATE 11/18/04

OWNER OR CONTRACTOR Claxton Homes PHONE: Business (704) 873-2547 Home

ADDRESS 2026 Northside Drive Statesville N.C. 28677

LOCATION Hwy 64 W (Taylorsville Rd) (L) Lippard Farm Rd on left @ 239 Lippard Farm Rd

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA 2.82 Acres SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. Existing

Septic Tank: 4000 Gallons; STB — Date —

Pump Tank: — Gallons; PT — Date —

Pump Make: — Model — Serial No. —

Existing Nitrification Field: No Fields 1 Square Feet 930 Linear Feet 310

No Lines 3 Trench Width 36" Max Trench Bottom Depth — Gravel Depth 12"

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

System Description: Gravel, Conventional

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 3

☒ Mobile Home No. Bathrooms —

☐ Business No. Employees —

☐ Other —

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

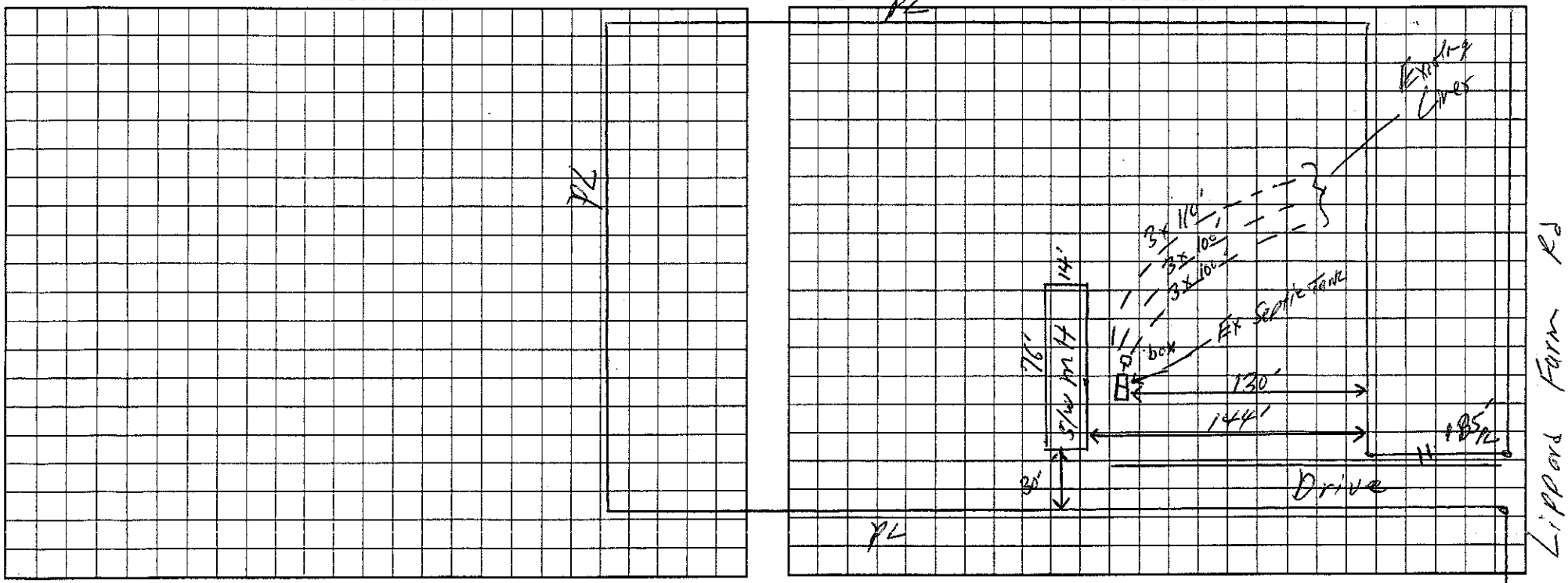
Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions:

Comments:/Conditions: Keep MH minimum 5 ft from Septic Tank & lines. System not in use at time of Inspection. System ok - appears to be functioning properly. (Ref: Rachel Pearce 8-28-91)

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: [signature] date 11/18/04

Improvement Permit by: — date —

Authorization to Construct by: — date —

Installed by: —

Operation Permit by: — date —

Existing System Inspection by: William O. Johnson date 11/18/04

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