CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 38549 PIN# 4712349644.016 57526 DATE 10/25/06

OWNER OR APPLICANT JERRY Price PHONE: Business 704-902-4355 Home 704-878-0334

ADDRESS 239 LEWIS FERRY RD STATESVILLE NC 28677

LOCATION BUFFALO SHOALS (E) EUFOLA (R) ATWELL (E) TURNOUT PROPERTY ON LEFT

SUBDIVISION EUFOLA FARMS BLOCK / SECTION ____ LOT 16 19 LOT AREA 5.76 ± SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1000 Gallons; STB 1042 Date 2-7-07

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet 6@=1440' Linear Feet 360'

No Lines 6@60' Trench Width 36" Max Trench Bottom Depth 36"

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

System Description: 6@60'PP 250/6 PERFORT

Repair System Description: SAME

Maintenance Agreement Required: ☐ Yes ☒ No

Gravel Depth N/A ☒ Gravity ☐ Pressure

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

No. Bedrooms 3 No. Persons 6 No. Employees ____

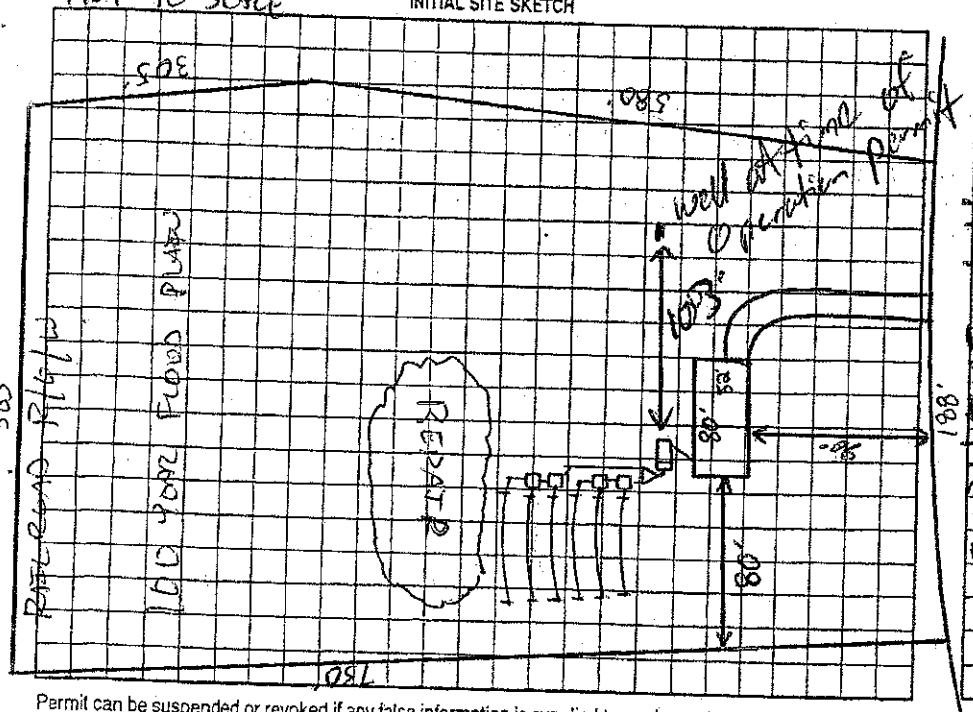
Water Supply: ☐ Individual ☒ Public ☐ Community

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

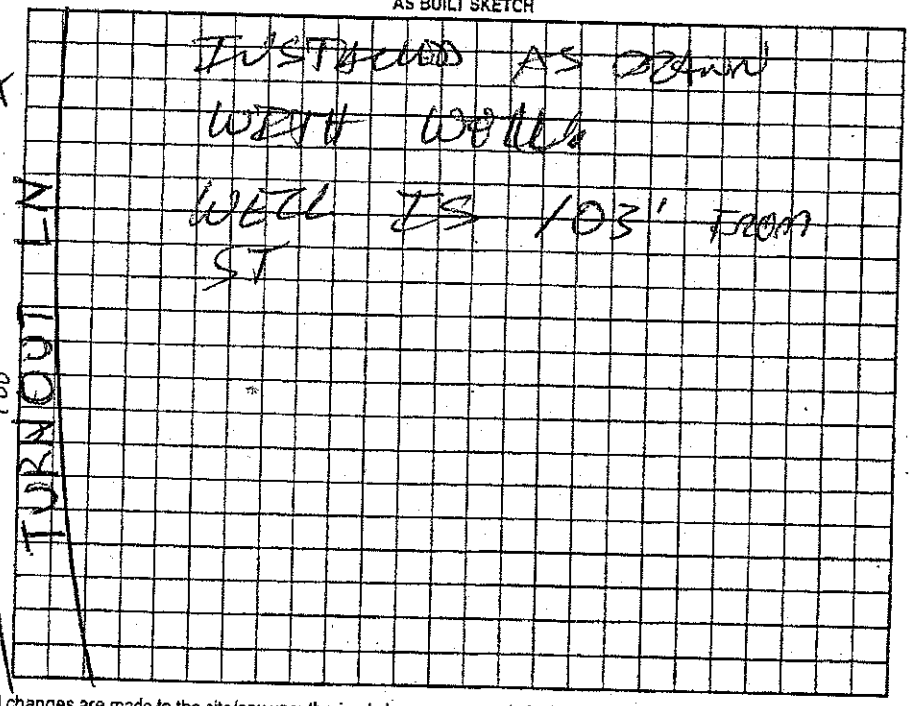
Comments/Conditions: (1) INSTALL 6 LINES / 60' LONG / USE 6 DROP BOXES & 1 FLOW DIVIDER TEE (2) INSTALL DRAIN LINES AT 36" DEEP

Comments/Conditions: TUFF JOB FILL & MACH INSTALLED SHIELD ON P/L & SYSTEM LINES 20'± OFF P/L

"NOT TO SCALE" 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 10-27-06 Installed by: DALE WINKLER

Improvement Permit by: [signature] RS date 10-25-06 Operation Permit by: [signature] RS date 6-27-07

Authorization to Construct by: [signature] RS date 10-25-06 Existing System Inspection by: ____ date ____

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