CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 138549 PIN# 4712349644-016 57526 DATE 10/25/06

OWNER OR APPLICANT JERRY Price PHONE: Business 704-902-4355 Home 704-878-0330

ADDRESS 239 LEWIS FERRY RD STATESVILLE NC 28677

LOCATION BUFFALO SHOALS (R) EUFOLA (R) ATWELL (R) TURNOUT Property on LEFT

SUBDIVISION EUFOLA FARMS BLOCK / SECTION ____ LOT 16 19 LOT AREA 5,768 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .25

Septic Tank: 1060 Gallons; STB 102 Date 2-7-07
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EG=1440' Linear Feet 360'
No Lines 6x60' Trench Width 36" Trench Bottom Depth 36" Gravel Depth 1 1/4

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 6 Quality 250 gal Presvt
Repair System Description: SAME
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Persons 6 No. Employees ____

Water Supply: ☐ Individual ☒ Public ☐ Community

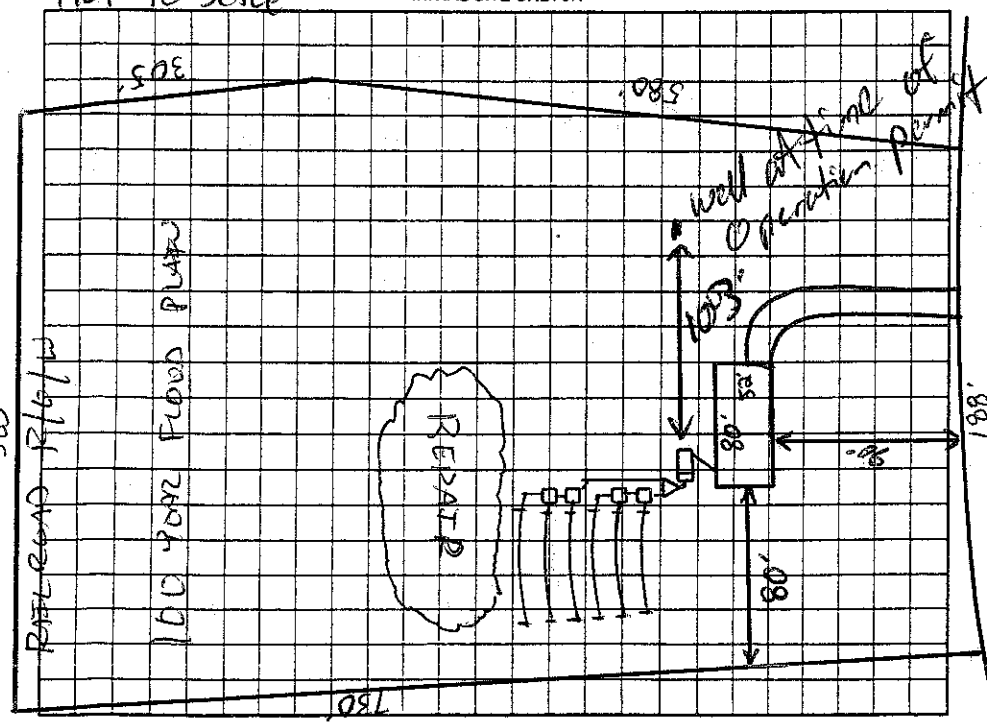
☒ Gravity ☐ Pressure ☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Comments/Conditions: (1) INSTALL 6 LINES / 60' LONG / USING 4 DROP BOXES & 1 FLOW DIVIDER TEE
(2) INSTALL DRAIN LINES AT 36" DEEP

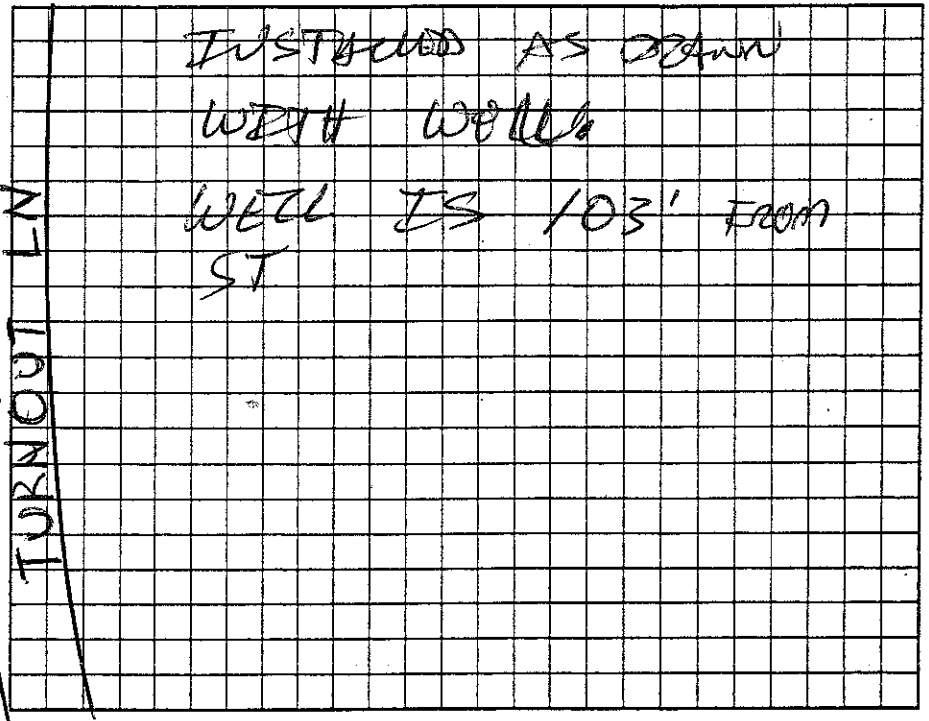
Comments/Conditions: TUFF TANK FILTER & MARKER
INSTALLER SHOWED ME P/L & SYSTEM
LINES 20'+ OFF P/L

1" 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: Jerry Price date 10-27-06 Installed by: DALE WITHROW

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