IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 122480 PIN# 4723-85-9173 DATE 7/14/04

OWNER OR CONTRACTOR PERRY JENKINS PHONE: Business (704) 872-0922 Home

ADDRESS 131 CARMON LANE STATESVILLE NC 28677

LOCATION 70W ⓒ BUFFALO SHOALS RD ⓒ AREY RD 2ND HOUSE ON RIGHT (159 AREY RD.)

SUBDIVISION AREY ACRES BLOCK / SECTION LOT 1 LOT AREA .697 SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.3 gpd/Ft²

Septic Tank: 1000 Gallons; STB 1012 Date 5-11-04
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 300'
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: LP PANEL 50% RED.
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

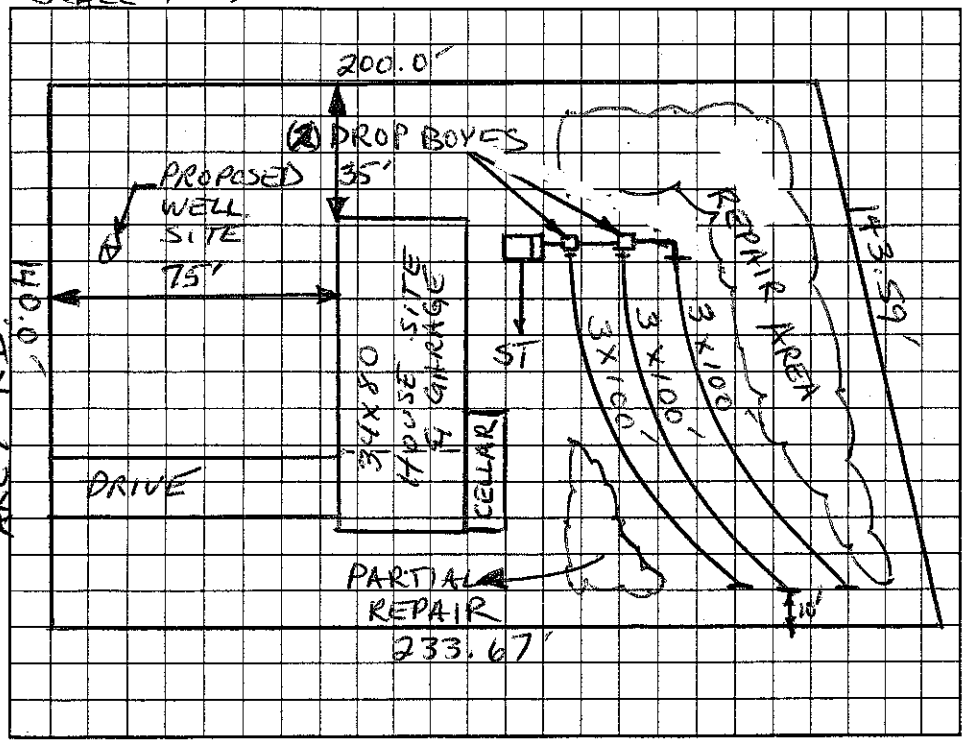
Water Supply: ☑ Individual ☐ Public ☐ Community WELL

Comments:/Conditions: ① INSTALL LINES ON CONTOUR ② MAINTAIN 15' SETBACK FROM CELLAR AND 100' WELL SETBACK.

Comments:/Conditions: W/CELLAR ① Tuff-Tite ② Riser on Tank 6" ③ Infiltrator chambers

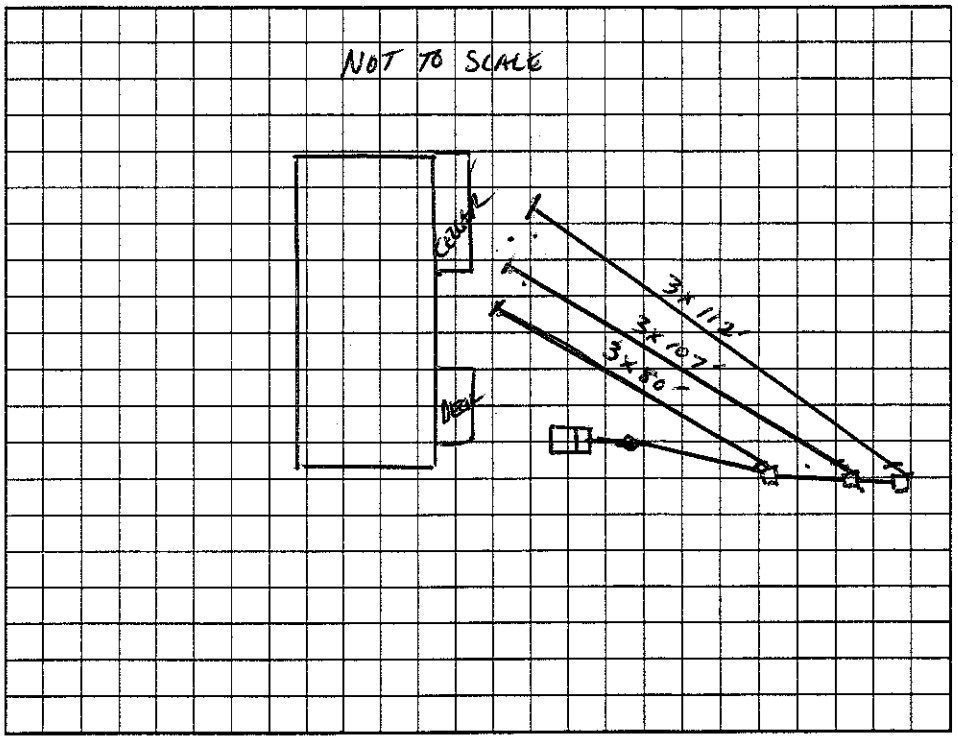
SCALE 1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

NOT TO SCALE



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 7/14/04 Installed by: TOMMY FRYE

Improvement Permit by: [signature], REHS date 7-14-04 Operation Permit by: [signature], REHS date 10-20-04

Authorization to Construct by: [signature], REHS date 7-14-04 Existing System Inspection by: date

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