IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# Repair PIN# 4725-40-3194 DATE 6/12/02

OWNER OR CONTRACTOR Robert Jarvis PHONE: Business Home

ADDRESS 122 Ray Lane Statesville N.C. 28625

LOCATION I-40 W, ① on Hwy 64/90 ② on Island Ford Rd. 2nd ho Howe on left, 203 (Island Ford Rd)

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1.89 Ac +/- SITE CLASS. #5 DESIGN FLOW — L.T.A.R. .30

Septic Tank: Existing Tank Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet 120'

No Lines 2 or 3 Trench Width 36" Max Trench Bottom Depth Gravel Depth 12"

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

System Description:

Repair System Description: Gravity Conv.

Maintenance Agreement Required: ☐ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

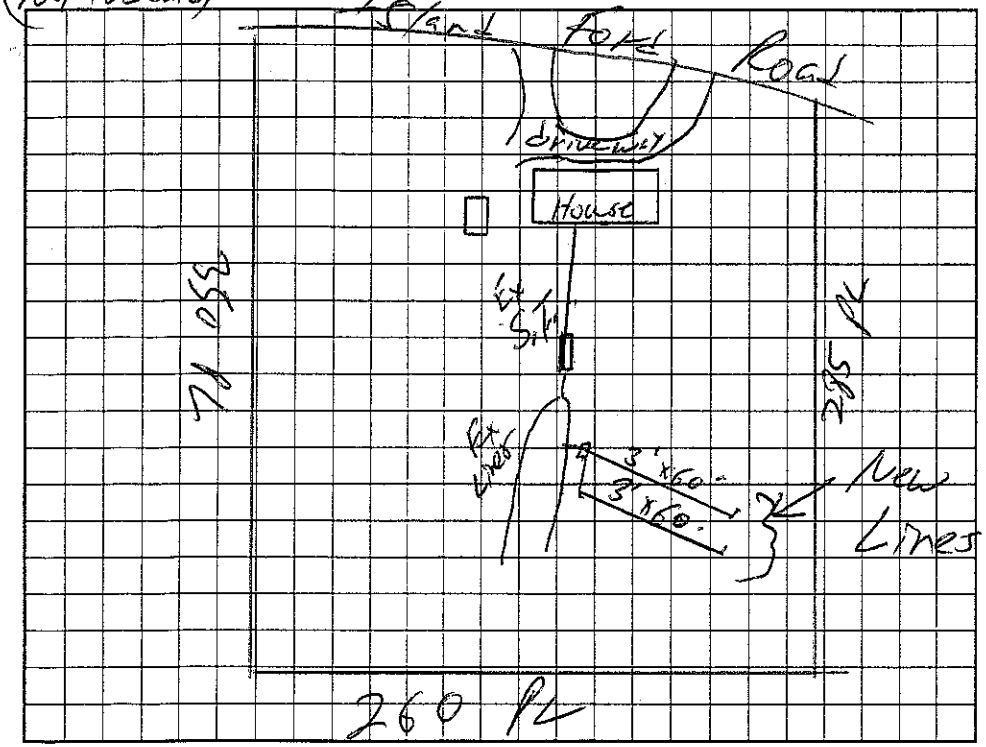
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

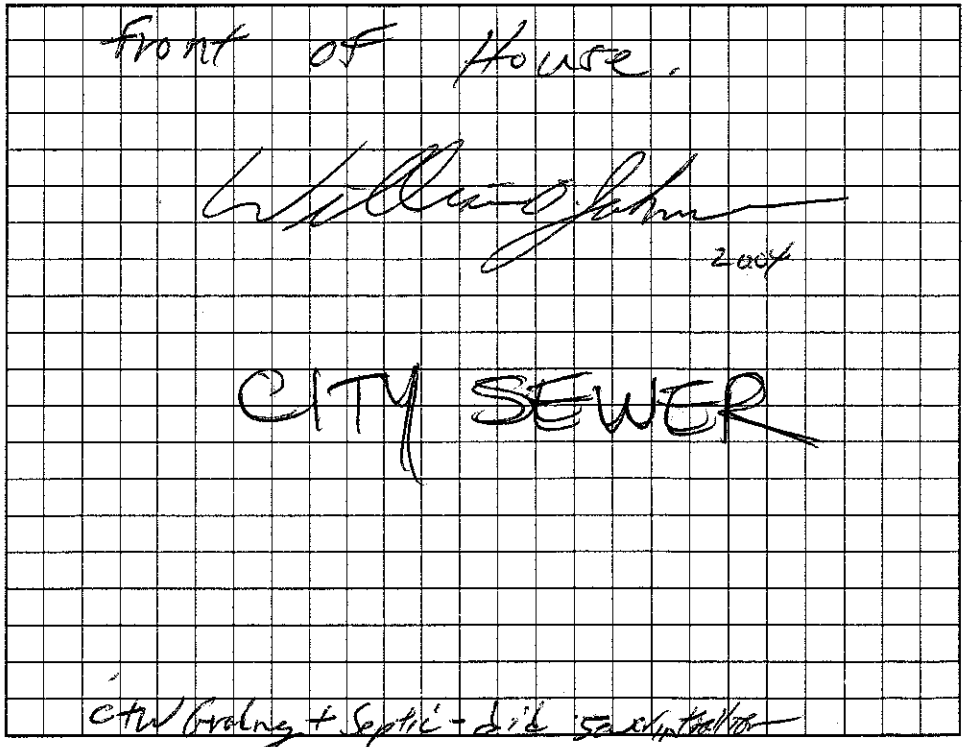
Comments:/Conditions: ① Add 2 or 3 line totaling 120 ft of Septic line ② replace Septic Tank if Needed ③ Plumb Washing Machine water into Septic Tank.

Comments:/Conditions: Abandon & Septic System and tapped on to City Sewer Line in front of House.

(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: Robert E Jarvis date 6-12-02 Installed by:

Improvement Permit by: William O. Johnson date 6/12/02 Operation Permit by: date

Authorization to Construct by: William O. Johnson date 6/12/02 Existing System Inspection by: date

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