IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (Carl) MOORESVILLE 704-664-5281

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

PERMIT# 144790 PIN# 4729-04-5933 DATE 12 March 08

OWNER OR APPLICANT Nancy Cloer PHONE: Business _____ Home _____

ADDRESS 141 Estate Drive Statesville, N.C.

LOCATION Same

SUBDIVISION Dulin King BLOCK / SECTION _____ LOT 4 LOT AREA 0.48ac. SITE CLASS. — DESIGN FLOW 360gpd T.A.R. —

Septic Tank: 1000 Gallons: STB _____ Date _____

Pump Tank: _____ Gallons; PT _____ Date _____

Pump Make: _____ Model _____ Serial No. _____

Nitrification Field: No Fields ___ Square Feet _____ Linear Feet _____

No Lines _____ Trench Width _____ Max Trench Bottom Depth _____ Gravel Depth _____

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

System Description: _____

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☐ No

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons ___

☐ Business No. Employees ___

☐ Other _____

Water Supply: ☐ Individual ☑ Public ☐ Community

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

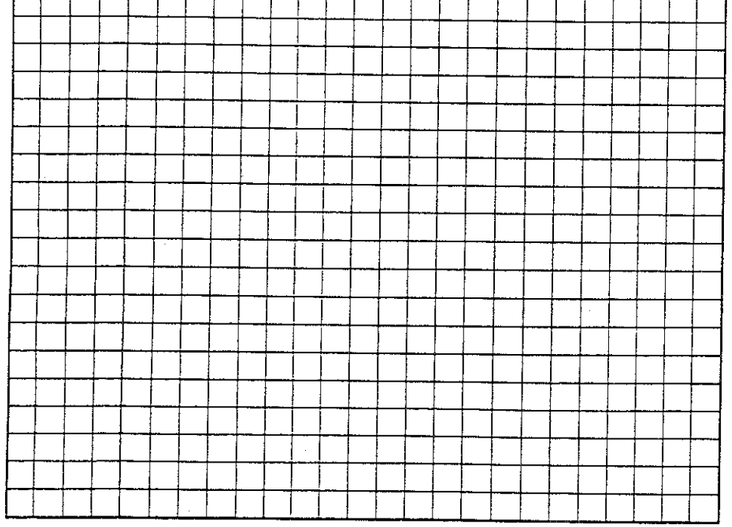
Comments:/Conditions:

Replace Septic Tank

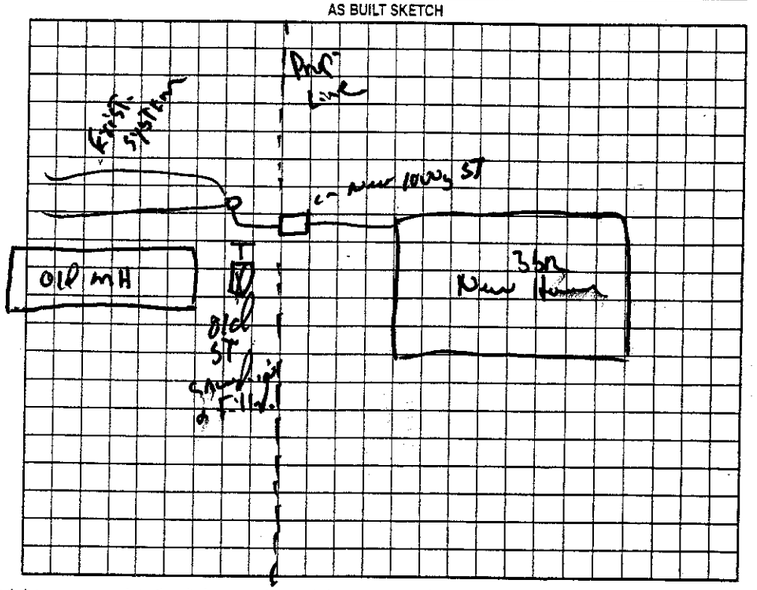
Properly abandon old septic tanks

Comments:/Conditions: Existing mobile home shall be disconnected from Existing System & New ST before final approval given to move into New home

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: Nancy Cloer date 3-12-08

Improvement Permit by: _____ date _____

Authorization to Construct by: _____, R.S. date 12 March 08

Installed by: James Hudgins

Operation Permit by: _____, R.S. date 31 July 08

Existing System Inspection by: _____ date _____

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