IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 117419 PIN# 4729-05-~~4830.002~~ 8856 DATE 1/20/04

OWNER OR CONTRACTOR SYLVIA CHURCH PHONE: Business _____ Home 336-973-5098

ADDRESS 841 KITE ROAD MILLERS CREEK NC 28651

LOCATION US 21N (L) FT DOBBS (R) CHIPLEY FORD (L) SULLIVAN FARM (R) NC 115 PROP. ON (R) ACROSS FROM TRASH DUMP

SUBDIVISION JOHN KING ESTATE BLOCK / SECTION _____ LOT 33 LOT AREA .67 SITE CLASS. RS DESIGN FLOW 360 L.T.A.R. .25 gpd/ft²

Septic Tank: 1000 Gallons; STB 1007 Date 1-9-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet 360
No Lines 6 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth N/A

☑ New System ☐ Repair System Type: I, II, (III) IV, V, VI
System Description: Grav 25% REDUCTION
Repair System Description: LP PANEL 50% RED
Maintenance Agreement Required: ☐ Yes ☑ No

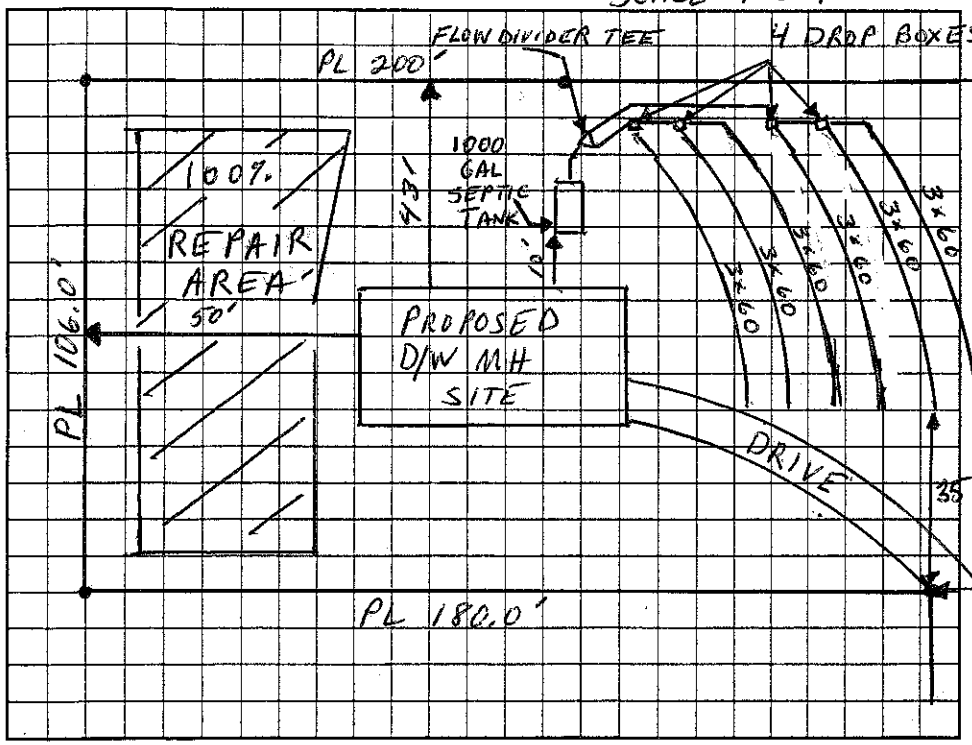
☐ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

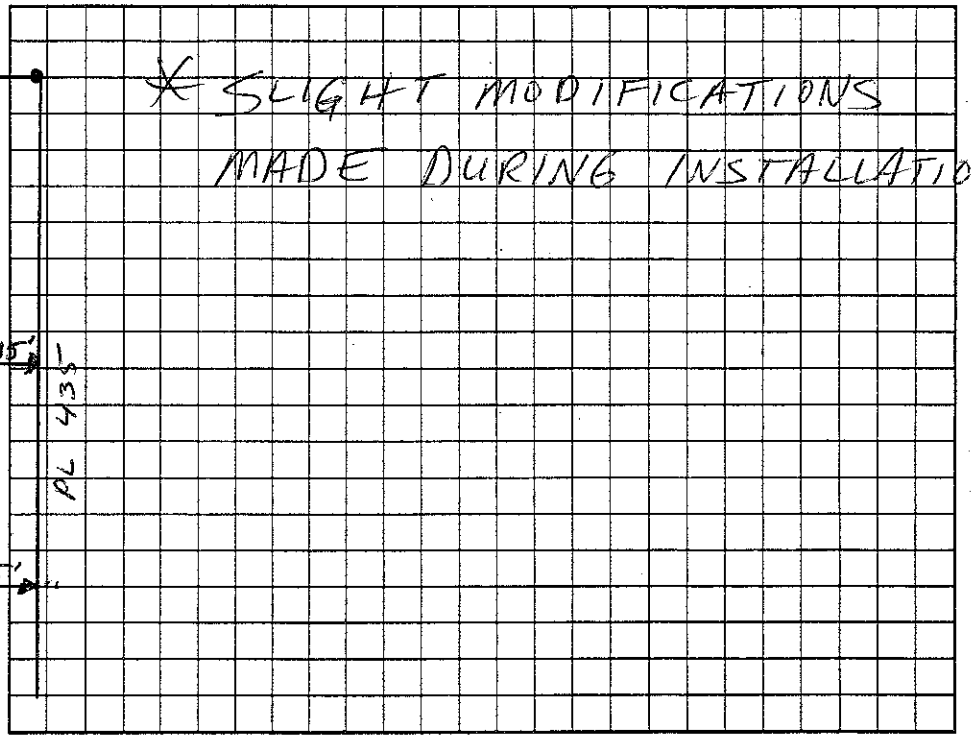
Comments:/Conditions: (1) INSTALL LINES 24" ON CONTOUR (2) MUST MEET ALL SETBACKS (3) NO VEHICULAR TRAFFIC OVER SEPTIC AREA

Comments:/Conditions: (1) TUFF-TITE FILTER (2) CHAMBER (3) SLIGHT MODIFICATIONS MADE TO ~~LAYOUT~~/ INSTALLATION.

INITIAL SITE SKETCH SCALE 1" = 40'



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: Sylvia Church date 2/9/04 Installed by: Wellborne's Grading

Improvement Permit by: Christopher M. Shevill, RS date 1-22-04 Operation Permit by: Christopher M. Shevill, RS date 3-3-04

Authorization to Construct by: Christopher M. Shevill, RS date 1-22-04 Existing System Inspection by: _____ date _____

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