93193

IREDELL COUNTY HEALTH DEPARTMENT

Paid 300.00

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

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

PERMIT# -2- TROUTMAN PIN# 4730 486343 DATE 11/22/99

OWNER OR CONTRACTOR C & S ASSOCIATES PHONE: Business 202-4971 Home

ADDRESS 4474 LAKE DRIVE SHERRELLS FORD NC 28673

LOCATION PERTH LO (S) - TR STATESMEN - TR MEADOW FALL LN ON RT NEAR END

SUBDIVISION MEADOW GLEN BLOCK / SECTION LOT 4 LOT AREA .4643 AC SITE CLASS PS DESIGN FLOW 360 gpd L.T.A.R. .3 gal/ft

Septic Tank: 1000 Gallons; STB 825 Date 1-4-01

Pump Tank: 1000 Gallons; PT 302 Date 3-1-01

Pump Make: GOULDS Model WE0311M Serial No [redacted]L001716J

Nitrification Field: No Fields 1 Square Feet 400 Linear Feet 200

No Lines 4 @ 50' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

(X) New System ( ) Repair System Type: I, II, (III), IV, V, VI

System Description: [redacted] PUMP PANEL

Repair System Description: SAME

Maintenance Agreement Required: ( ) Yes (X) No

(X) House/Mod. Home No. Bedrooms 3

( ) Mobile Home No. Bathrooms 2

( ) Business No. Employees

( ) Other

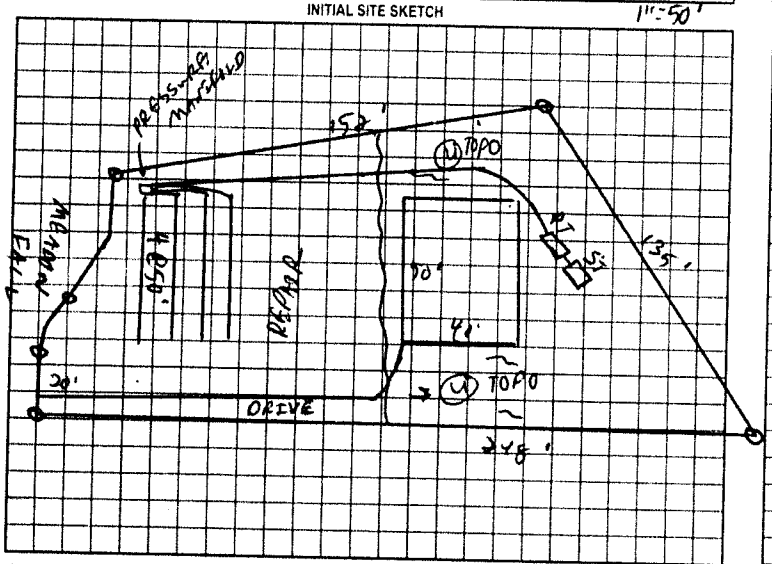
( ) Slab (X) Crawl Space ( ) Basement w/plumbing ( ) Basement wo/plumbing

Water Supply: (X) Individual ( ) Public ( ) Community TROUTMAN

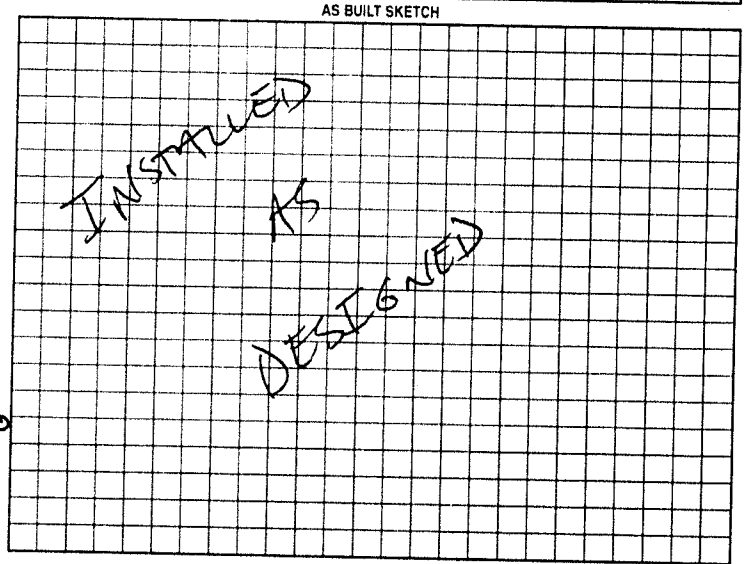
Comments/Conditions:

Comments/Conditions 4/9/01 - DRAWINGS CHECKED - NEEDS ELECTRICAL
4/14/01 PUMP ELECTRICAL, PUMP SEPTIC TANK EVERY 3-5 YRS.

INITIAL SITE SKETCH 1"=50'



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: [signature] date 5-9-00 Installed by: ROWAN SEPTIC

Improvement Permit by: C. [signature] PS date 11/22/99 Operation Permit by: [signature] date 4/14/01

Authorization to Construct by: C. [signature] PS date 11/22/99 Existing System Inspection by: date

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