IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 88002 PIN# 4762 06 0007 DATE 3-22-00

OWNER OR CONTRACTOR Keith Williams, FOX Builders PHONE: Business 528 3564 Home

ADDRESS 113 Charis Ln

LOCATION Wallace Sp Rd Turn Charis at corner of Shalom sta N.C.

SUBDIVISION Williams Fm BLOCK / SECTION LOT 9 LOT AREA 1.94 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.25 gal/sq/day

Septic Tank: 1000 Gallons: STB 1027 Date 10-17-00
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines 4 Trench Width 36" Max Trench Bottom Depth 24" Gravel Depth N/A

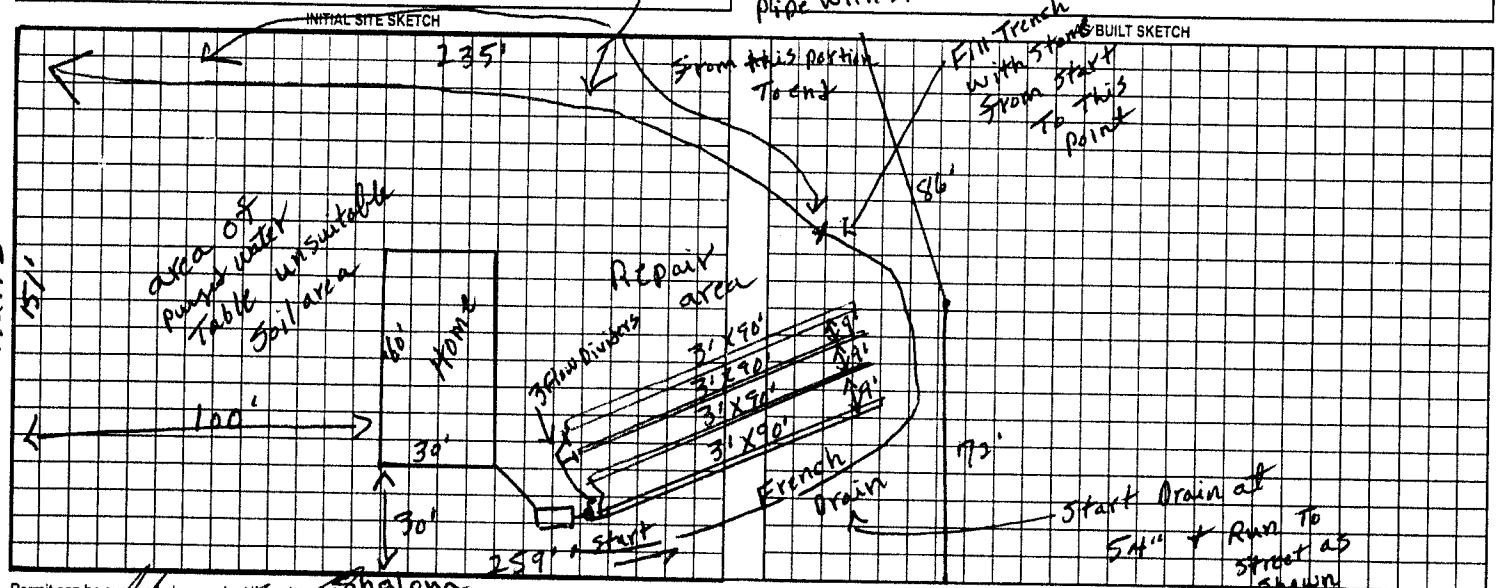
☑ New System ☐ Repair System Type: I. II. III. IV. V. VI
System Description: Gravity 25Eo Rabit
Repair System Description:
Maintenance Agreement Required: ☐ Yes ☑ No

☑ 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:

Comments/Conditions: System Installed as drawn - Gravity French drain not Installed



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: _____ date _____ Installed by: Advanced Backhoe

Improvement Permit by: P. C. Moore date 3-22-00 Operation Permit by: _____ date 3/7/01

Authorization to Construct by: P. C. Moore date 3-22-00 Existing System Inspection by: _____ date _____

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