# IREDELL COUNTY

PO Box 788
349 North Center St.
Statesville, NC 28677

**APPLICATION NUMBER**

**201233**

Issue Date: 01/15/2014

## Permit Type: SEPTIC REPAIR APPLICATION

| Parcel Number | Street Address | Jurisdiction |
|---|---|---|
| 4736642677.000 | 154 JENKINS ROAD | STATESVILLE |

| Owner Information | Applicant Information | Contractor Information |
|---|---|---|
| Owner: BROWN TRAVIS L+ALIENE<br>Address: 154 JENKINS RD<br>STATESVILLE, NC 28625<br>Phone: | Applicant: BROWN, TRAVIS<br>Address: 154 JENKINS ROAD<br>STATESVILLE, NC 28677<br>Phone: 704-876-4283 | Contractor: BROWN, TRAVIS<br>Address: 154 JENKINS ROAD<br>STATESVILLE, NC 28677<br>Phone:<br>License Type License Number |

**Project Description**

REPAIR SEPTIC SYSTEM PERMIT

**Scope of Work**

EVAL AND REPAIR

**Permit Details:**

| | | |
|---|---|---|
| IMPROVEMENT PERMIT FEE | Amount: | 75.00 |
| SEPTIC SYSTEM REPAIR EVALUATE | Amount: | 60.00 |
| | Amount: | |
| | Amount: | |
| | Amount: | |
| | Amount: | |
| | Amount: | |

I hereby certify that all information in this application is correct and all work will comply with the state code and all other applicable state and local laws, ordinances and regulations. The respective department will be notified of any changes in the approved plans, a change of contractor, and/or specifications for the project permitted herein. This application becomes a permit only when validated and approved.

Signature of Owner/Contractor

**Date:** 01/15/2014

***ANY PERMIT ISSUED EXPIRES SIX (6) MONTHS AFTER ISSUANCE IF NO INSPECTIONS HAVE BEEN MADE. ANY PERMIT ISSUED SHALL EXPIRE TWELVE (12) MONTHS AFTER LAST INSPECTION IF THE WORK IS DISCONTINUED.***

| Permit Number | 4690 | TOTAL FEES: | $ 135.00 |
|---|---|---|---|