IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5365 — MOORESVILLE 704-664-5281

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

REPAIR

PERMIT# _____ PIN# _____

OWNER OR CONTRACTOR Randy SHANSON PHONE: Business _____ Home 704 578-5012 Mobil DATE March 13-2000

ADDRESS 117 Autumn Leaf Trotman

LOCATION Hwy 21 South (R) Autumn Leaf 3rd House on Left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA _____ SITE CLASS. P3 DESIGN FLOW _____ L.T.A.R. _____

Septic Tank: 1000 Gallons: STB 466 Date 2-9-00
Pump Tank: _____ Gallons: PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet _____ Linear Feet _____
No Lines 2 Trench Width 12Ft Max Trench Bottom Depth 38-40" Gravel Depth 20-22"

☐ New System ☒ Repair System Type: I. II. III. IV. V. VI
System Description: _____
Repair System Description: GRAVITY
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____

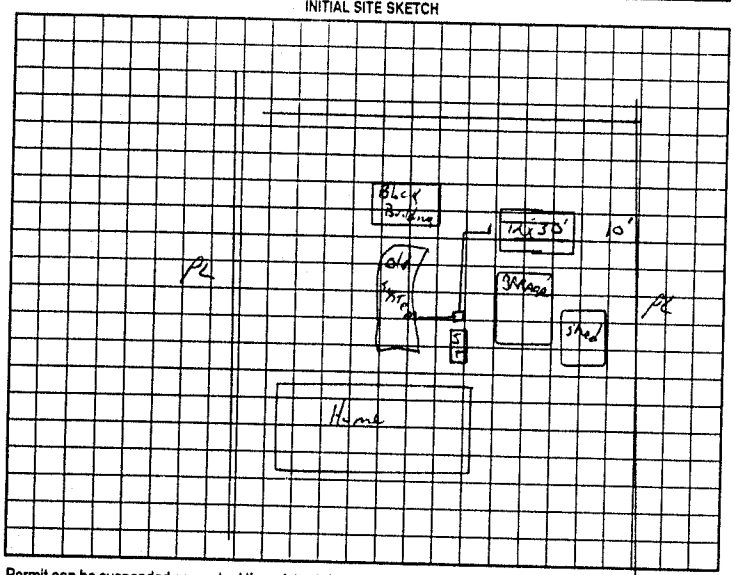
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community — well

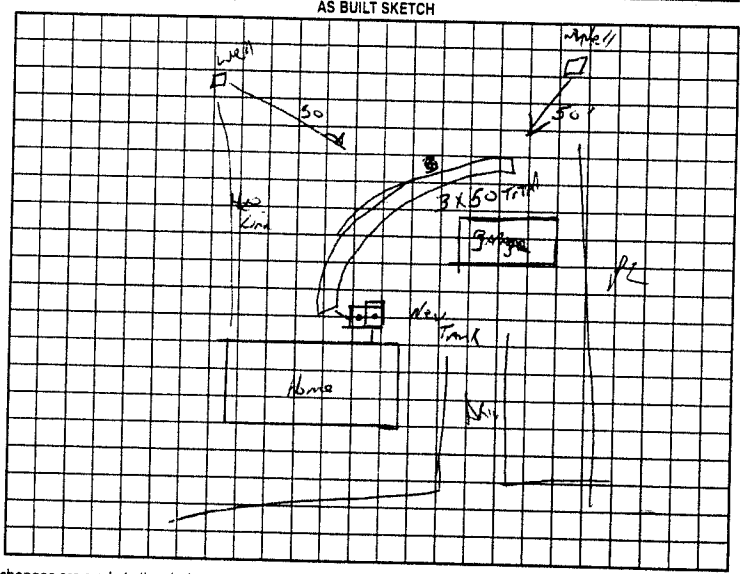
Comments/Conditions:
① Set New Tank
② Pump & Remove old Tank
③ 12 x 30 Ft Bed w/ 2 Lines fed AT SAme Time
④ Tie in old System To feed LAST

Comments/Conditions:
Apx 53 Ton Stone used
NOTE: CLEAR WATER coming from old Line AT end of new Line
INCORPORATED Old Red w/ new Line

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: Agent Barry D. Simmon date _____

Improvement Permit by: J. C. Potter date 3-15-2000

Authorization to Construct by: J. C. Potter date 3-15-2000

Installed by: Barry Simmon

Operation Permit by: J. C. Potter date March 17 2000

Existing System Inspection by: _____ date _____

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