IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 089869 PIN# 4742434886 PT DATE 6/28/2000

OWNER OR CONTRACTOR Lonnie Trautman PHONE: Business 873-5233 Home

ADDRESS 232 Davie Ave Statesville, NC 28677

LOCATION Hwy 115 S. TL Murdock TL Duck Creek on Right.

SUBDIVISION Duck Creek Acres BLOCK / SECTION LOT 3 LOT AREA .97 Acres SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1072 Date 8/22/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200'+ Linear Feet 400'+
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36"

[X] New System [ ] Repair System Type: I (II) III, IV, V, VI
System Description: Gravity - Conventional
Repair System Description: Gravity - Conv. or Innovative
Maintenance Agreement Required: [ ] Yes [X] No
Gravel Depth 12" [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

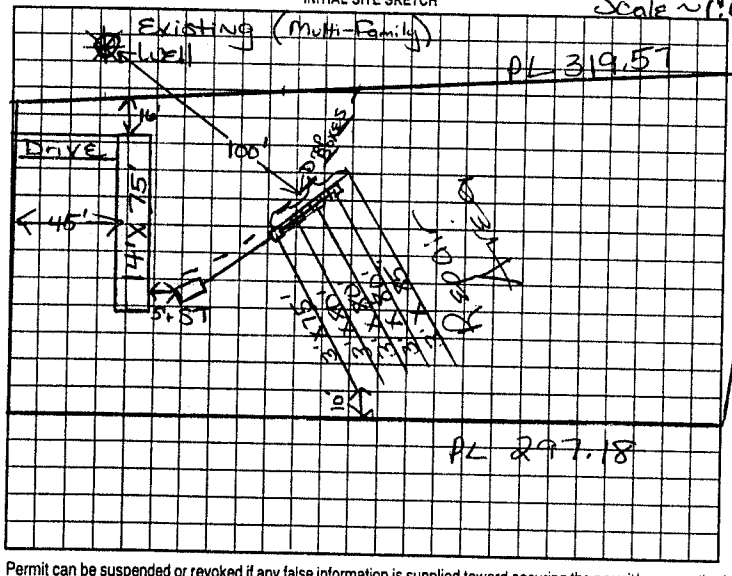
[ ] House/Mod. Home No. Bedrooms 3
[X] Mobile Home No. Bathrooms 2
[ ] Business No. Employees
[ ] Other

Water Supply: [X] Individual Shared [ ] Public Multi-Family [ ] Community

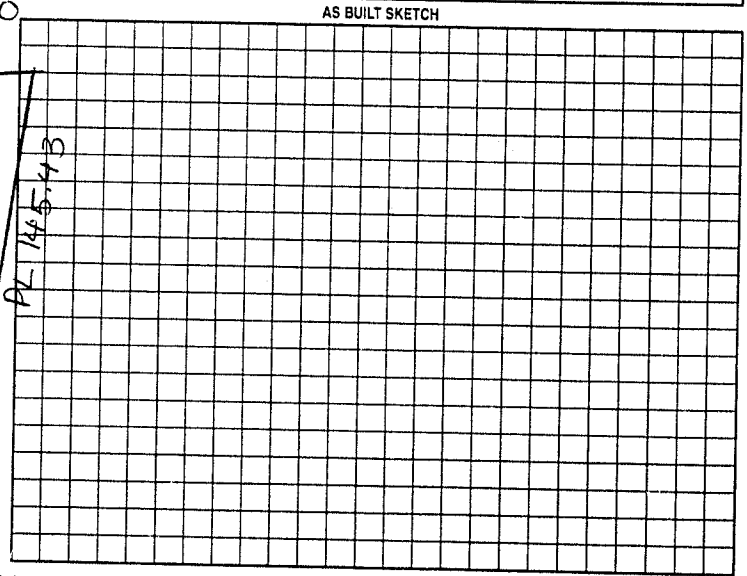
Comments/Conditions: Keep Septic System at least 100' From Well, 10' From PL & 5' From house

Comments/Conditions:

INITIAL SITE SKETCH Scale ~ 1" 60



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: Clara Trautman date 6/30/00 Installed by: Steve Jordan

Improvement Permit by: Marian H. Dotson RS date 6/28/2000 Operation Permit by: [signature] RST date 10/3/00

Authorization to Construct by: Marian H. Dotson RS date 6/28/2000 Existing System Inspection by: date

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