Chris McHargue

202813

Repair

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# PIN#

OWNER OR CONTRACTOR Mike Owens PHONE: Business Home 876 2880 DATE 6-4-99

ADDRESS 123 Ginny Lane Statesville N.C.

LOCATION 21 N TO Shoemaker TL Ginny Ln 2nd House left

SUBDIVISION BLOCK / SECTION LOT LOT AREA 1/2 acre SITE CLASS. DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 3-X Gallons; STB Date

Pump Tank: Gallons; PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields 1 Square Feet 720 Linear Feet 240

No Lines 2 Trench Width 72" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description:

Repair System Description: Conv Gravity

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

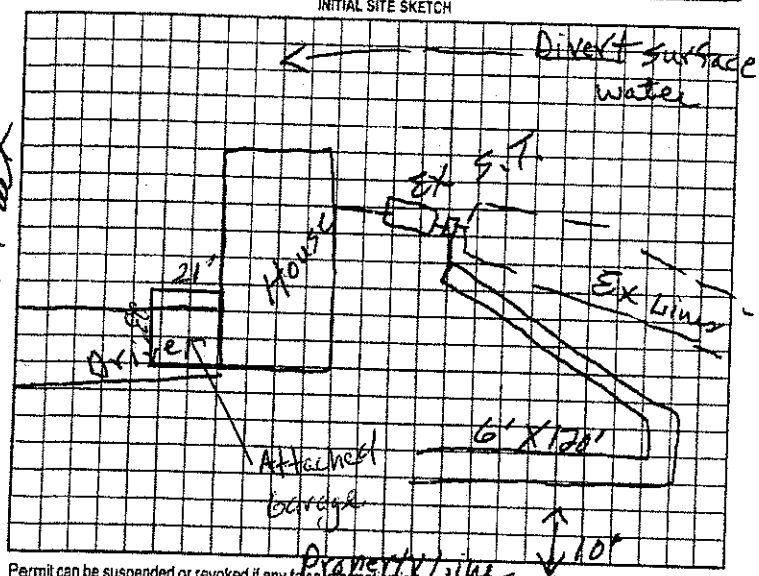
☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☐ Public ☐ Community

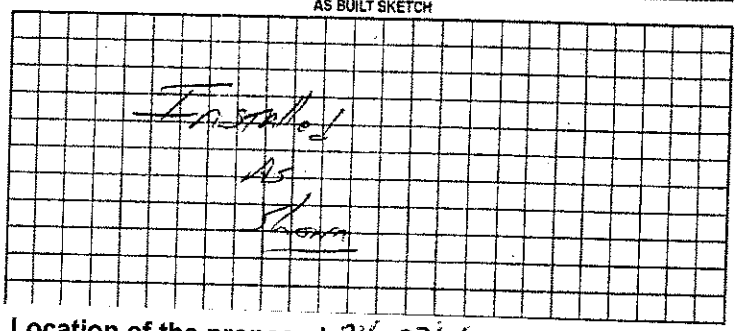
Comments/Conditions:

Comments /Conditions:

INITIAL SITE SKETCH



AS BUILT SKETCH



Location of the proposed 21'x23' Garage addition does not appear to impact the existing on-site septic system or well. **NOTE:**

Robert H. Brown REHS Date: 04/29/14

ICHD-Environmental Health Division

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: X Mike Owens date 6-4-99 Installed by: Eskew Elder

Improvement Permit by: P.C. Moore date 6-4-99 Operation Permit by: C Potter date 6/8/99

Authorization to Construct by: P.C. Moore date 6-4-99 Existing System Inspection by: date

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