IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 092050 PIN# 4747 17 1780 DATE 9-26-00

OWNER OR CONTRACTOR ROGER CLOER PHONE: Business A-1 MH'S Home 873-1014

ADDRESS 3499 S. CHIPLEY FORD ROAD, STATESVILLE NC 28625

LOCATION US 21 N, TL JENNINGS RD, TL WHITE'S FARM RD, TR DIETZ RD, TO END, MIDDLE DRIVE

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 40.15 Ac. SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.40 GPD/SQ FT

Septic Tank: 1000 Gallons; STB 620 Date 7-24-00
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36 Max Trench Bottom Depth 36 Gravel Depth 12"

☑ New System ☐ Repair System Type: I (II) III IV V VI
System Description: CONVENTIONAL GRAVITY
Repair System Description: CONVENTIONAL GRAVITY
Maintenance Agreement Required: ☐ Yes ☑ No

☐ House/Mod. Home No. Bedrooms 4
☑ Mobile Home No. Bathrooms 2
☐ Business No. Employees _____
☐ Other _____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

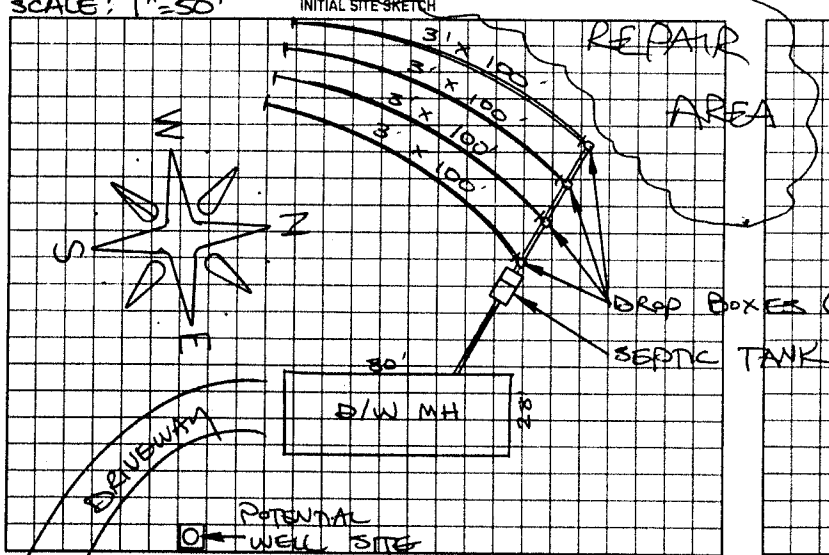
Water Supply: ☑ Individual ☐ Public ☐ Community
WELL

Comments/Conditions: KEEP SYSTEM MINIMUM 100 FEET FROM WELL
100'

Comments/Conditions SEPTIC TANK WITH RISERS INSTALLED USING "TUF-TITE" FILTER

SCALE: 1"=50'

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: _____ date 9-26-00 Installed by: KENNY MADISON

Improvement Permit by: STEVE HEDRICK date 9-26-00 Operation Permit by: STEVE HEDRICK date 10-10-2000

Authorization to Construct by: STEVE HEDRICK date 9-26-00 Existing System Inspection by: _____ date _____

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