(C7)

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 138286 PIN# 4747 64~~[illegible]~~ 54 8829 DATE 10-9-06

OWNER OR APPLICANT JEJ Custom Homes PHONE: Business 704-902-2772 Home 704-873-2530

ADDRESS 143 OAK Grove RD Statesville NC 28677 Billy DEAN

LOCATION 21 North (L) SHUMAKER OR (R) DOMS DALE (L) STATION ONE RT

SUBDIVISION DOMS DALE BLOCK / SECTION 2 LOT 25 LOT AREA 1.571 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 13

Septic Tank: 1000 Gallons: STB 1012 Date 4-9-06
Pump Tank: ____ Gallons: PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet EQ=1200' Linear Feet 360'
No Lines 7 Trench Width 36" Max Trench Bottom Depth 36"

☒ New System ☐ Repair ☐ Expansion System Type: I (II) III IV V VI
System Description: 6 DRAIN 25% REDUCT
Repair System Description: LP 50'/, REDUCT
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Persons 6
☐ Business No. Employees ____
☐ Other ____

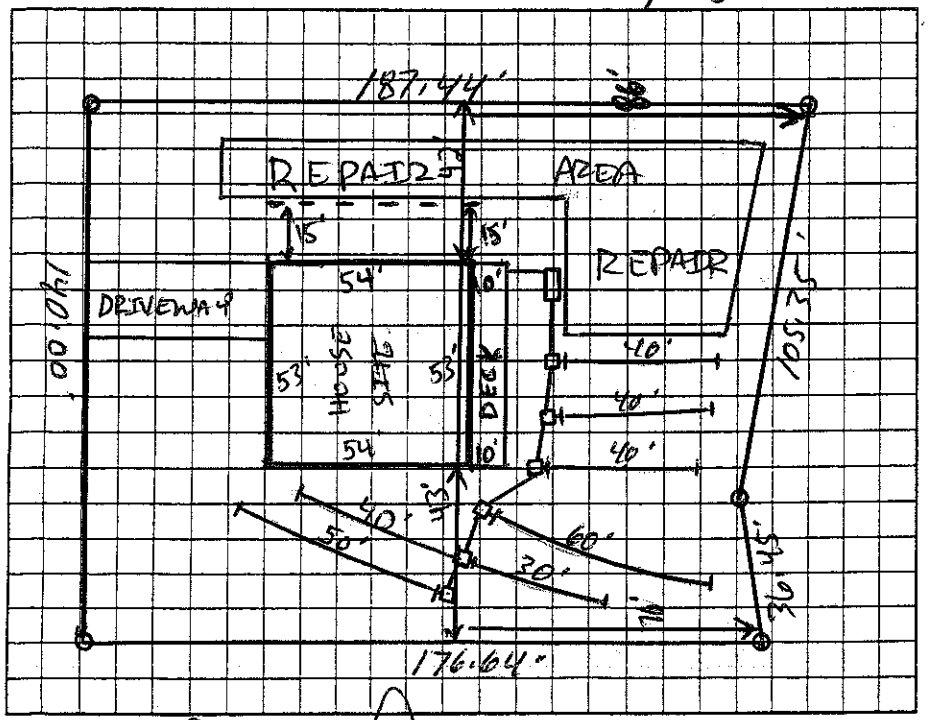
Water Supply: ☐ Individual ☒ Public ☐ Community

Gravel Depth N/A ☒ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

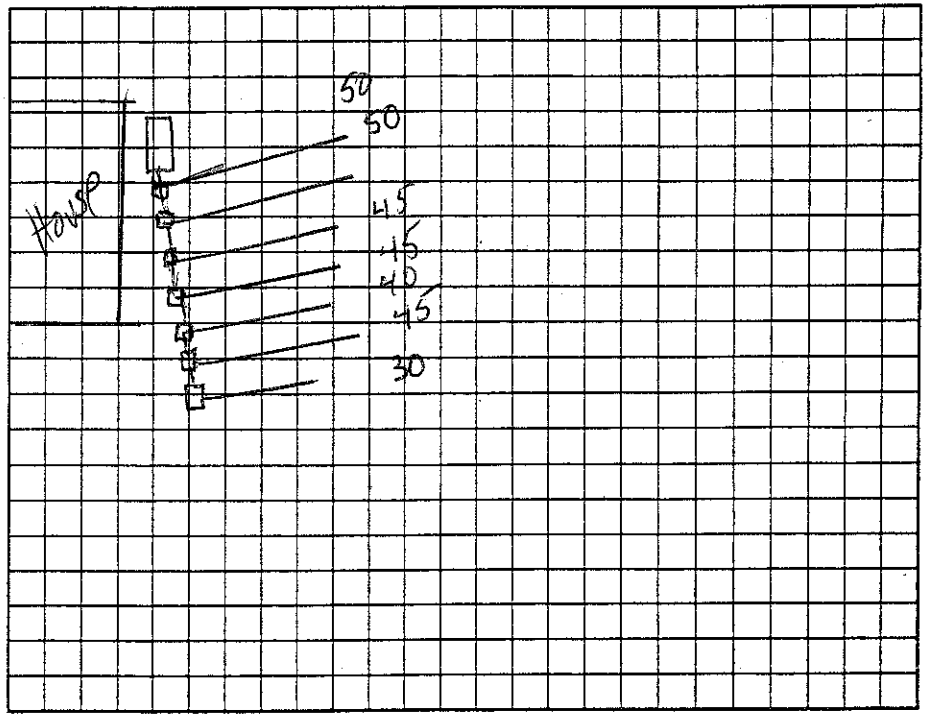
Comments:/Conditions: (1) Keep House Out of Grade & BACKFILL For Positive Drainage (2) INSTALL LINES ON CONTOURS & MAINTAIN SETBACKS.

Comments:/Conditions: Yellow Filter

INITIAL SITE SKETCH 1" = 50'



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: [signature] date 10-9-06 Installed by: Craig Thompson

Improvement Permit by: [signature] date 10-9-06 Operation Permit by: [signature] date 1-30-07

Authorization to Construct by: [signature] date 10-9-06 Existing System Inspection by: ____ date ____

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