IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 93160 PIN# 4752 67 0086 DATE 12/6/00

OWNER OR CONTRACTOR Natalie Adkins PHONE: Business Home 883-8922

ADDRESS 829 Bristol Dr. Statesville NC 28625

LOCATION DE, R Shiloh, R Henderson, on Lt

SUBDIVISION Henderson MHP BLOCK / SECTION LOT 10 LOT AREA 15,000 ft2 SITE CLASS PS DESIGN FLOW 240 L.T.A.R. —

Septic Tank: Existing Gallons: STB Date

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet Linear Feet

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

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

System Description: Existing

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home No. Bedrooms 2

☒ Mobile Home No. Bathrooms 1

☐ Business No. Employees

☐ Other

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

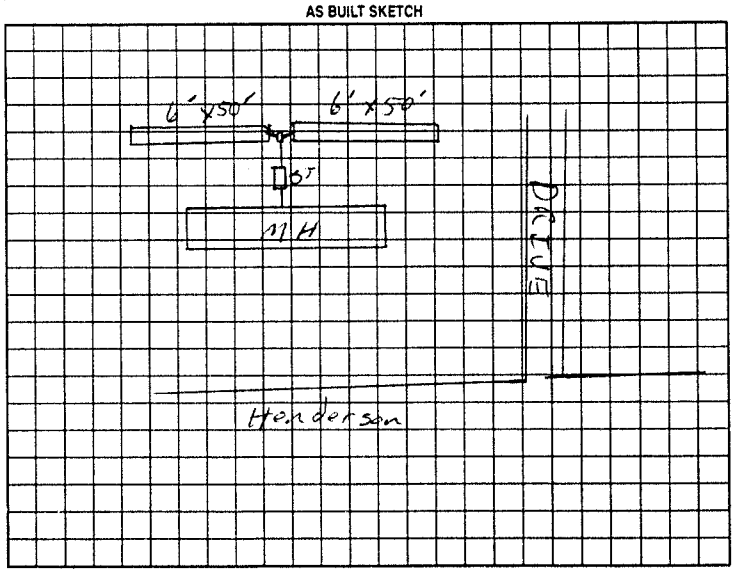
Water Supply: ☐ Individual ☐ Public ☒ Community

Comments:/Conditions:

Comments:/Conditions:

INITIAL SITE SKETCH

AS BUILT SKETCH



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 Installed by:

Improvement Permit by: date Operation Permit by: date

Authorization to Construct by: date Existing System Inspection by: RSI date 12/5/00

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