# IREDELL COUNTY HEALTH DEPARTMENT

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

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

ad

PERMIT # 155769 PIN # 4752721621 DATE 4-8-9

OWNER or APPLICANT Larry P. Munday / Frank Millsaps PHONE: Business Home: 704 872 6019

OWNER or APPLICANT ADDRESS 786 Shiloh Rd.

LOCATION / DIRECTIONS Hwy 70E, (R) on Shiloh on right @ 786 Shiloh

SUBDIVISION n/a BLOCK / SECTION LOT # LOT AREA DESIGN FLOW Ex L.T.A.R. Ex.

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Septic Tank | Ex | Gallons: STB | | Date | ☐ New System ☐ Repair ☐ Expansion System Type I (II) III IV V VI | ☒ Residence | No. Bedrooms | Ex | Water Supply |
| Pump Tank | | Gallons: P T | | Date | System Description: Existing | ☐ Business | No. Persons | | ☒ Private |
| Pump Make | | Model | | Serial # | Repair System Description: | ☐ Other | No. Employees | | ☐ Public |
| Nitrification Field | No Fields Ex | No Lines Ex | Linear Feet Ex | | Maintenance Agreement Required ☐ YES ☐ NO | ☐ Slab | ☐ Crawl Space | | ☐ Community |
| Trench Width | Ex | Max. Trench Bottom Depth | Ex | Gravel Depth Ex | ☐ GRAVITY ☐ PRESSURE | ☒ Basement w/plumbing | ☐ Basement w/o plumbing | | |

Comments / Conditions

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INITIAL SITE SKETCH

The proposed Sunroom / Deck addition does not appear to impact the existing septic system.

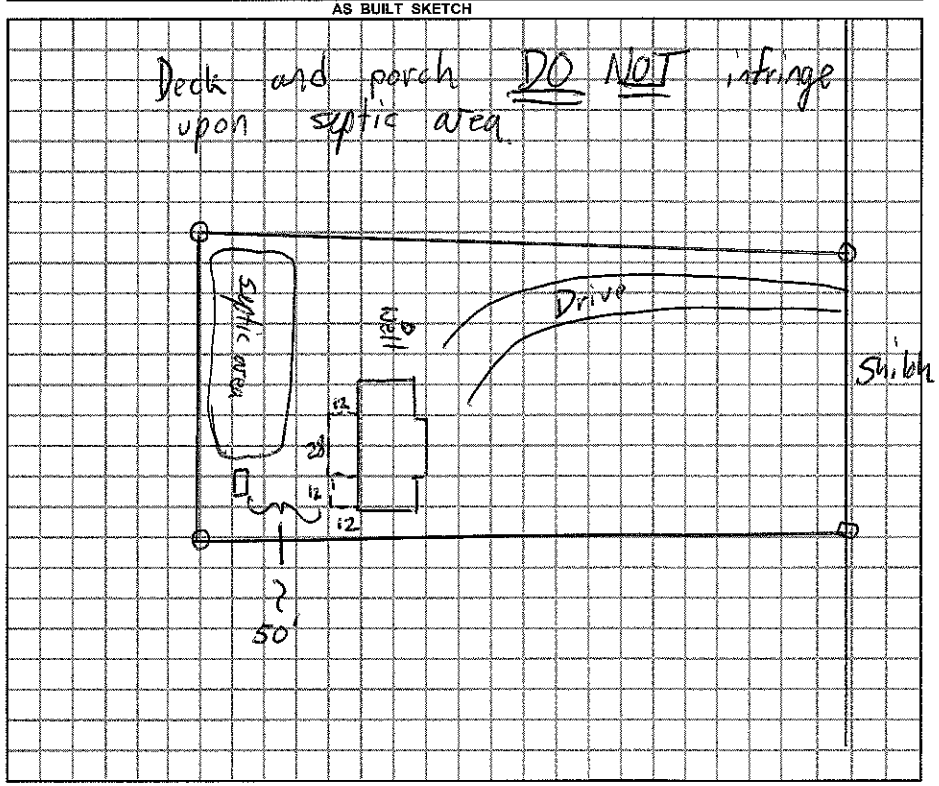
**NOTE:

James R.S.

Date: 4-8-9

ICHD-Environmental Health Division

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 w / plat valid without expiration.* ☐ *IMPROVEMENT PERMIT w / site plan valid for 60 mos.* ☐ *AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT-not to exceed 60 mo.*

Owner / Applicant Signature: Larry Munday Date 4-15-09

Improvement Permit by: Date

Authorization to Construct by: Date

***YOU SHOULD CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION.***

Installed by:

Operation Permit by: Date:

Existing System Inspected by: James R.S. Date: 4-8-9

WHITE COPY Environmental Health YELLOW COPY (Final) Owner / Applicant PINK COPY (Initial) Owner / Applicant