93537

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# Statesville 9906 PIN# 4754 53 1966 DATE 11/27/00

OWNER OR CONTRACTOR Sherry Crosby PHONE: Business _____ Home 924-9002

ADDRESS 1822 E. Greenbriar Rd Statesville NC 28625

LOCATION 64E, R Greenbriar, R Mahogany, L on Dept Rd 2nd on Rt

SUBDIVISION _____ BLOCK / SECTION — LOT — LOT AREA 2.196 AC SITE CLASS PS DESIGN FLOW 480 L.T.A.R. 0.5

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 Add 133' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

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

System Description: Add Conventional Line

Repair System Description: _____

Maintenance Agreement Required: ☐ Yes ☒ No

☐ House/Mod. Home ☒ Mobile Home ☐ Business ☐ Other _____

No. Bedrooms 4 No. Bathrooms 2 No. Employees ___

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

Water Supply: ☐ Individual ☒ Public ☐ Community

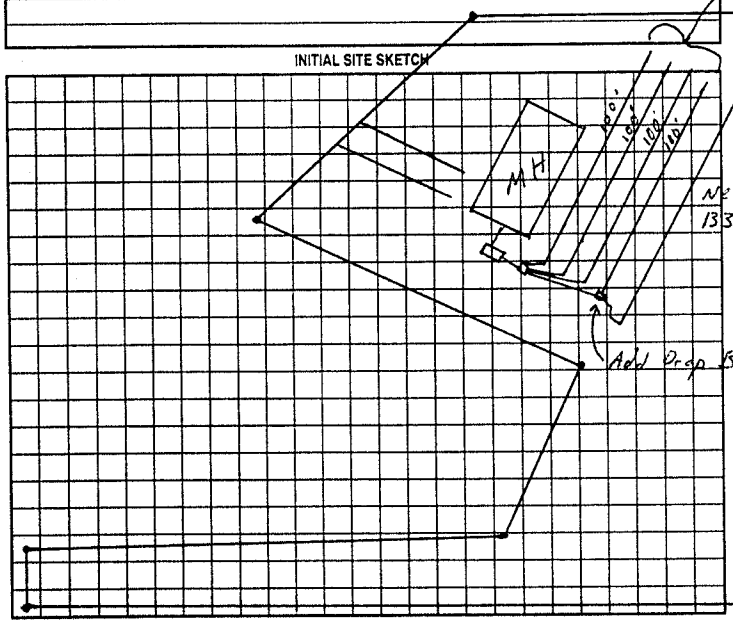
Comments/Conditions:

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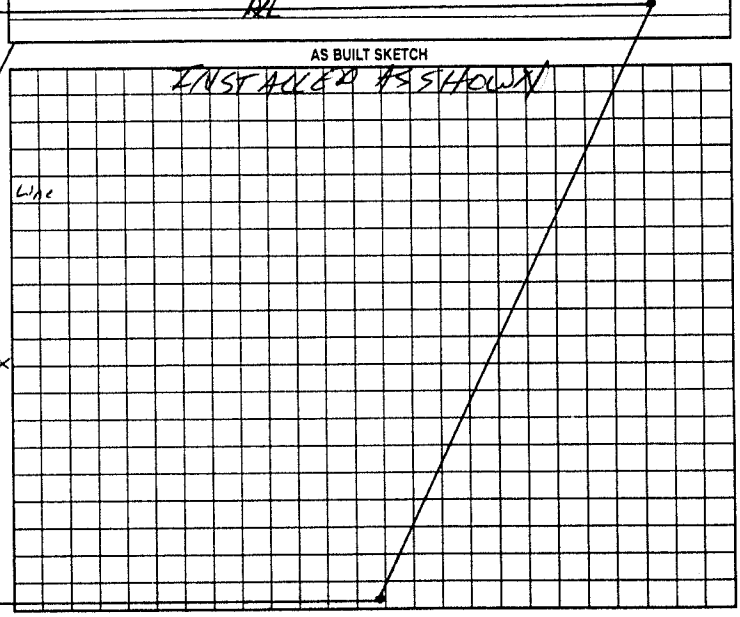
Existing Lines

AH

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: Sherry Sean Crosby date 11/28/00 Installed by: TUCKER GRADING

Improvement Permit by: RSI date 11/28/00 Operation Permit by: RSI date 01-24-01

Authorization to Construct by: RSI date 11/28/00 Existing System Inspection by: _____ date _____

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