CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 101346 PIN# 4756-24-2011.07 DATE 7-20-01

OWNER OR CONTRACTOR SPEAR CONSTRUCTION PHONE: Business 704-636-7954 Home

ADDRESS 607 ANDERSON AVE, SALISBURY, NC 28144

LOCATION HWY 21 N, (E) JANE SOWERS 1 BLOCK PAST CRAWFORD RD ON RT

SUBDIVISION BEANTWOOD BLOCK / SECTION LOT 7 LOT AREA .5978 AC SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 790/ Date 2-9-00
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No
Nitrification Field: No Fields 1 Square Feet EQ=1200 Linear Feet 300'
No Lines 5 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I II III IV V VI
System Description: GRAV 25% RED
Repair System Description: PUMP 15% RED / LP PANEL
Maintenance Agreement Required: ☐ Yes X No

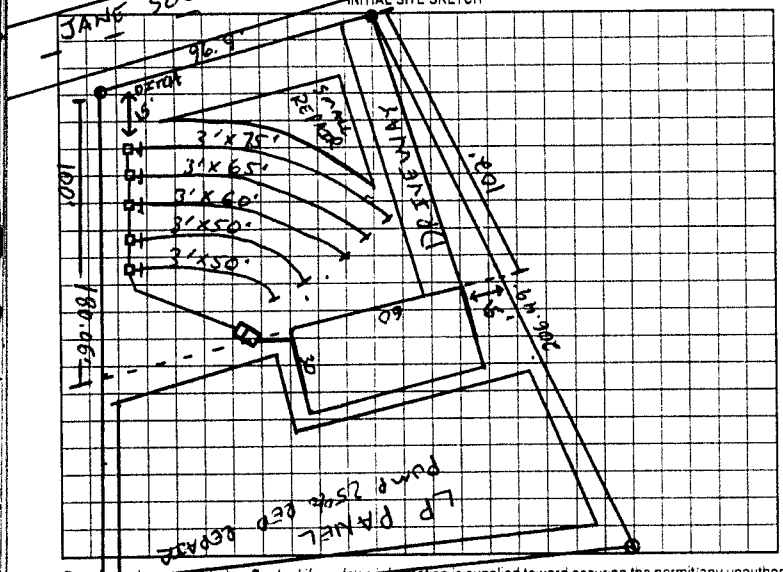
X House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other
No. Bedrooms 3 No. Bathrooms 2 No. Employees
Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public ☐ Community

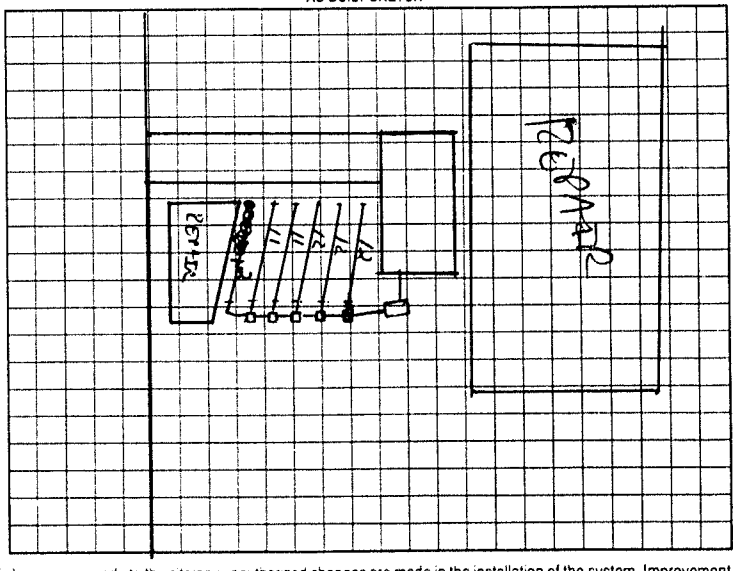
Comments/Conditions:
① INSTALL LINES ON CONTOUR
② MAINTAIN SETBACKS
③ H2O LINE 10' FROM SYSTEM

Comments/Conditions: ZABEL FILTOR & MARKER, INSTALLED AS BELOW IN 6 LINES

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. Authorization to Construct 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 07/30/01 Installed by: MADISON BROS GRADING

Improvement Permit by: RSI date 7-20-01 Operation Permit by: PS date 10-18-01

Authorization to Construct by: RSI date 7-20-01 Existing System Inspection by: date

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