IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C) MOORESVILLE 704-664-5281

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

PERMIT# 12676 PIN# 4757-27-1778.001 172924 DATE 6-1-05

OWNER OR CONTRACTOR EDWARD & CLARA WELBORN PHONE: Business _____ Home 704-876-0805

ADDRESS 295 REEVES RD STATESVILLE, NC 28625

LOCATION JENWINGS RD @ REEVES ON LEFT BY END BESIDE CHICKEN HOUSE

SUBDIVISION _____ BLOCK / SECTION _____ LOT ~~#####~~ LOT AREA .652 SITE CLASS PS DESIGN FLOW 240 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 11-17-04
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 800 Linear Feet 270
No Lines 3 Trench Width 36" ~~Maximum~~ Bottom Depth 36" Gravel Depth #12"

☒ New System ☐ Repair System Type: ☐ II ☐ III, IV, V, VI
System Description: CONV GDN
Repair System Description: GDN 25% RED
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

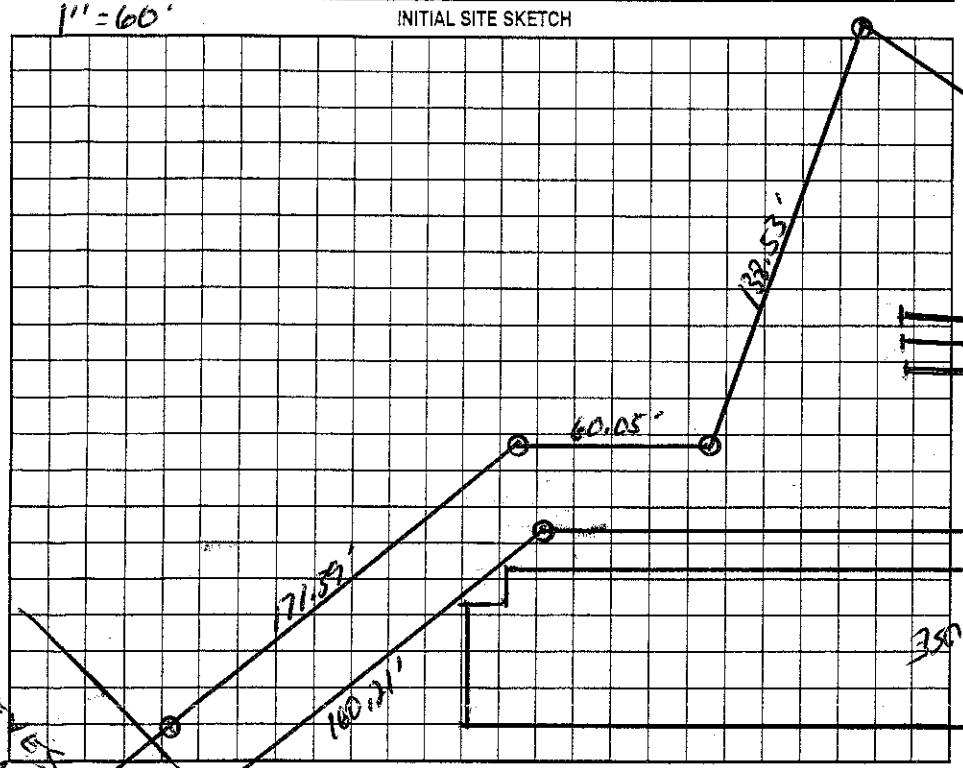
Water Supply: ☐ Individual ☒ Public ☐ Community

Comments:/Conditions: ① INSTALL LINES AT 36" DEEP BECAUSE OF BETTER SOILS & HUMPS & BUMPS TO CONTOURS. ② MAINTAIN SETBACKS.

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "TUFFTITE" FILTER

1" = 60'

INITIAL SITE SKETCH



AS BUILT SKETCH

SYSTEM INSTALLED ACCORDING TO INITIAL SITE 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: Clara L Welborn date 6-1-05 Installed by: STEVE JORDAN / PIEDMONT BACKHOE

Improvement Permit by: [signature] date 6-1-05 Operation Permit by: STEVE HENDRICK date 6-6-05

Authorization to Construct by: [signature] date 6-1-05 Existing System Inspection by: _____ date _____

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