3:30

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 8203 PIN# 4757352459 DATE June 12, 2000

OWNER OR CONTRACTOR Ginger Cecil / Doyle Cecil Inc. PHONE: Business _____ Home _____

ADDRESS 4474 Lake Dr Sherrills Ford 28673

LOCATION 21N to Bethany Rd TR Gilead Lane TR Berea Lane TR Mt Zion on left

SUBDIVISION Bethany Trace BLOCK / SECTION 2 LOT 32 LOT AREA .45 AC SITE CLASS PS DESIGN FLOW 360gpd L.T.A.R. .3

Septic Tank: 1000 Gallons: STB 825 PS Date 4-8-00

Pump Tank: _____ Gallons: PT _____ Date _____

Pump Make: _____ Model _____ Serial No _____

Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300

No Lines 5 Trench Width 36" Max Trench Bottom Depth 48"

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

System Description: GRAVITY INNOVATIVE -25% Red

Repair System Description: Pumped INNOVATIVE -25% Red

Maintenance Agreement Required: ☐ Yes ☑ No

Gravel Depth N/K ☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

☑ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees _____

☐ Other _____

Water Supply: ☐ Individual ☐ Public ☐ Community

Comments/Conditions: @ ONE inspection port per lateral, set flush with finished grade. Start lower 4 lines deeper (40-48" Hg) to compensate for fill soil around lower end of home and contour variation.

Comments/Conditions: This permit replaces permit issued 6-29-99 by JCH.

INITIAL SITE SKETCH

1" = 50'

Install Storm water Ditch/Berm here

200'

SW Arrow

80 70 60 60 60

SPA

HOUSE SITE

Proposed Repair Area

DRIVEWAY

100'

R/W Street/Private Dr.

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: Ginger Cecil date 6/13/00

Improvement Permit by: [signature], RS date 6-12-00

Authorization to Construct by: [signature], RS date 6-12-00

Installed by: Rowan Septic Tank

Operation Permit by: [signature], RS date June 15, 00

Existing System Inspection by: _____ date _____

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