IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 paid 130.00 MOORESVILLE 704-664-5281

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

PERMIT# 103103 PIN# 4758 87 0182 DATE 8/25/04

OWNER OR CONTRACTOR WAYNE HOMES PHONE: Business 873-5367 Home

ADDRESS 605 GREENBRIAR DR STATESVILLE NC 28625

LOCATION 21 NORTH - TL FAIRMOUNT RD - TL WINDROW - AT END ON LT

SUBDIVISION FAIRMOUNT FIELDS BLOCK / SECTION LOT 7 LOT AREA .458AC SITE CLASS AS DESIGN FLOW 360GPD L.T.A.R. .360/FT2

Septic Tank: 1000 Gallons; STB 1012 Date 6-27-04
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 5@60' Trench Width 36" Max Trench Bottom Depth 36"

☑ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: GRAVITY 25% REDUCTION
Repair System Description: LP PANEL
Maintenance Agreement Required: ☐ Yes ☑ No
Gravel Depth N/A

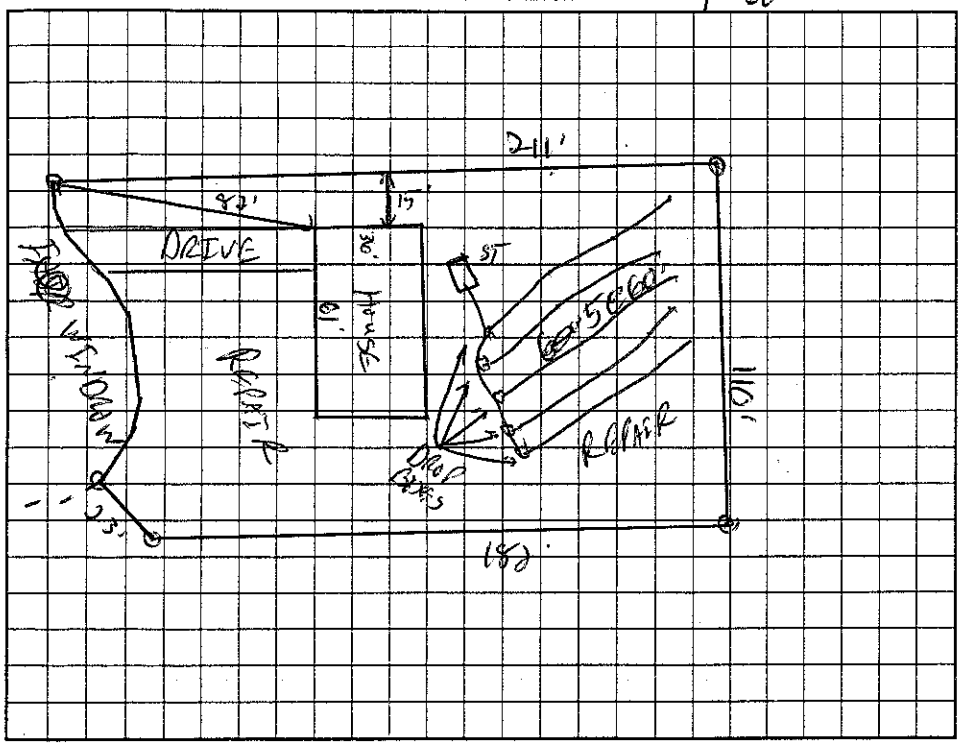
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 3
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

Comments:/Conditions:

Comments:/Conditions: (1) TUFF TITE FILTER (1) INFILTRATOR CHAMBERS

INITIAL SITE SKETCH 1"=60'



AS BUILT SKETCH

X SYSTEM INSTALLED ACCORDING TO 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: Scott Caughron date 8-25-04 Installed by: C+S GRADING

Improvement Permit by: C. Yates RS date 8/25/04 Operation Permit by: Christy Mabe RS date 11/18/04

Authorization to Construct by: C. Yates RS date 8/25/04 Existing System Inspection by: date

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