IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 125.00 Paid 10:00 MOORESVILLE 704-664-5281

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

PERMIT# 095666 PIN# ~~4760 17 5284~~ 4760-15-2792 DATE 5/9/01

OWNER OR CONTRACTOR Joel R. Howard PHONE: Business 704-892-3152 Home

ADDRESS 18400 Shelburne Rd. Davidson, NC. 28036

LOCATION 115-21 N TR Shinnville Rd TL Weathers Creek Rd. X creek on (L) at top of hill

SUBDIVISION County View BLOCK / SECTION 3 LOT 17 LOT AREA .6 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 1012 Date 3/3/01
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 3@100' Trench Width 3' Max Trench Bottom Depth 3' Gravel Depth No

☒ New System ☐ Repair System Type: I, II, (III), IV, V, VI
System Description: 25% Reduction - Drentex
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

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

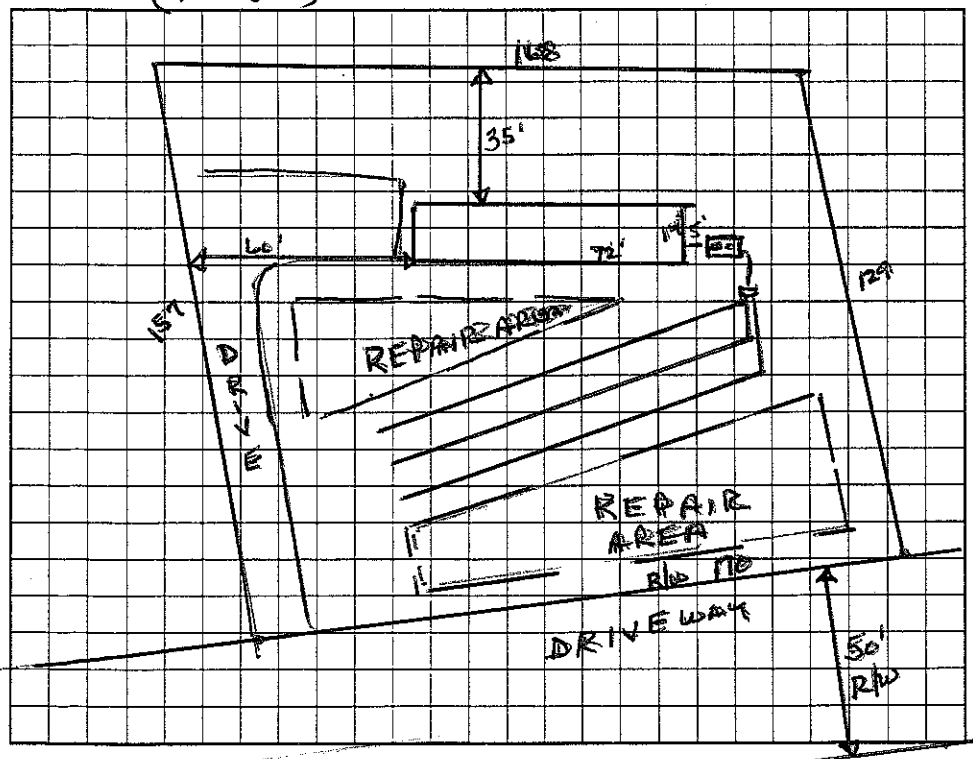
Water Supply:
☐ Individual
☐ Public
☒ Community

Comments:/Conditions:

Comments:/Conditions: IN Filtrators Installed

(1" = 50')

INITIAL SITE SKETCH



AS BUILT SKETCH

Installed As Drawn

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: X Joel R. Howard date 5-9-01

Improvement Permit by: Wesley Sparks R.S. date 5/9/01

Authorization to Construct by: Wesley Sparks R.S. date 5/9/01

Installed by: A-1 Backhoe

Operation Permit by: [signature] R.S. date 5/15/01

Existing System Inspection by: date

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