IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 071361 PIN# ~~4760-75-2844-PT~~ 4760-15-7213 DATE 2/20/98

OWNER OR CONTRACTOR Howard & Associates PHONE: Business 892-3152 Home

ADDRESS 18400 Shearer Rd Davidson NC 28036

LOCATION Hwy 115 N TR Shinnville Rd TL Weathers Creek Rd TR Sydney Rd on Corner

SUBDIVISION Country View Est BLOCK / SECTION LOT 8 LOT AREA .67 Acre SITE CLASS. PS DESIGN FLOW 360 gpd L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 794 Date 7/11/96
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 4 at 100' Trench Width 36" Max Trench Bottom Depth 28" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: Grav. Conventional
Repair System Description: Same
Maintenance Agreement Required: ☐ Yes ☒ No

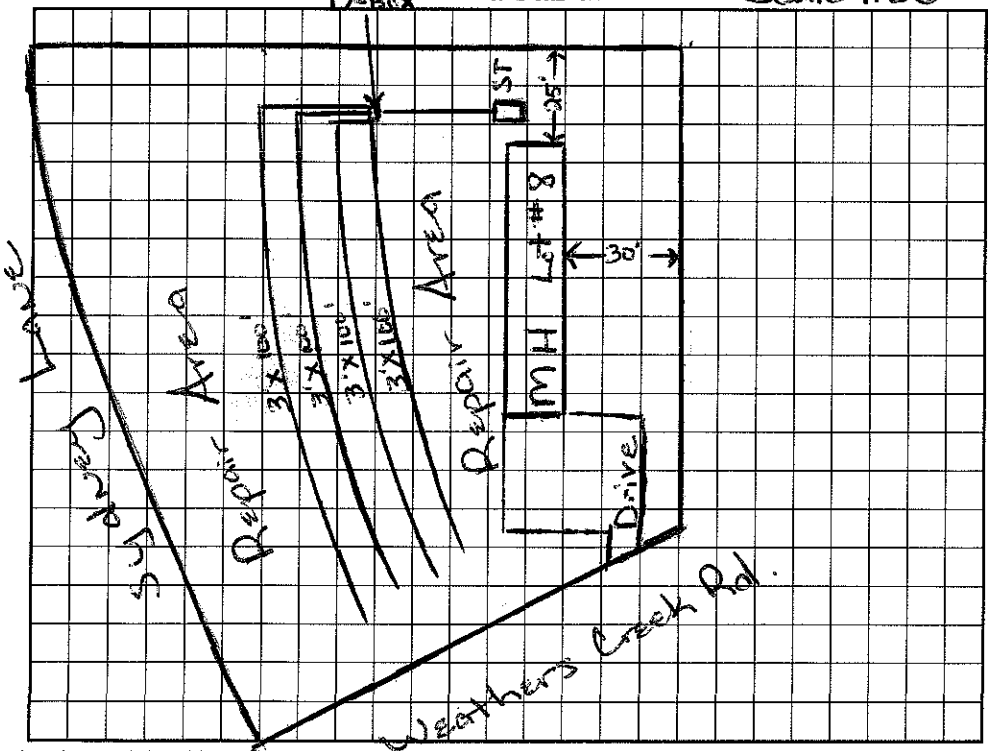
☐ House/Mod. Home No. Bedrooms 3
☒ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community
Private with Multi Connect.

Comments:/Conditions: Keep Septic System at least 10' From Property lines & 5' from House.

Comments:/Conditions:

INITIAL SITE SKETCH Scale 1:50



AS BUILT SKETCH

I understand that this 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: Joel Howard date 3-12-98 Installed by: LARRY BEAM

Improvement Permit by: Maria H. Dotson date 2/20/98 Operation Permit by: date 9/9/98

Authorization to Construct by: Maria H. Dotson date 2/20/98 Existing System Inspection by: date

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