IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 11146 PIN# 4762-32-8560 DATE 03/05/03

OWNER OR CONTRACTOR KATHLEEN JENKINS PHONE: Business ~~X~~ CELL: 704-682-1419 Home 704-873-3544

ADDRESS 586 SHILOH RD. STATESVILLE, NC 28677 CELL*: 704-682-1398

LOCATION HWY 70 EAST, (R) BETHESDA RD., (L) HICKORY NUT DR., PROPERTY ON RIGHT, ON CORNER OF HICKORY NUT/BETHESDA.

SUBDIVISION LAUREL GROVE BLOCK / SECTION ____ LOT 58 LOT AREA 1.01 ACRES SITE CLASS. PS DESIGN FLOW 360 GPD L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1,000 Gallons; STB 794 Date 02/28/03

Pump Tank: ____ Gallons; PT ____ Date ____

Pump Make: ____ Model ____ Serial No. ____

Nitrification Field: No Fields 1 Square Feet EQ to 1,200 Linear Feet 300

No Lines 4 @ 75' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth N/A

X New System ☐ Repair System Type: I, II, (III), IV, V, VI

System Description: 25% REDUCTION, GRAVITY

Repair System Description: 50% REDUC, PUMP

Maintenance Agreement Required: ☐ Yes X No

☐ House/Mod. Home No. Bedrooms 3

X Mobile Home No. Bathrooms 2

☐ Business No. Employees ____

☐ Other ____

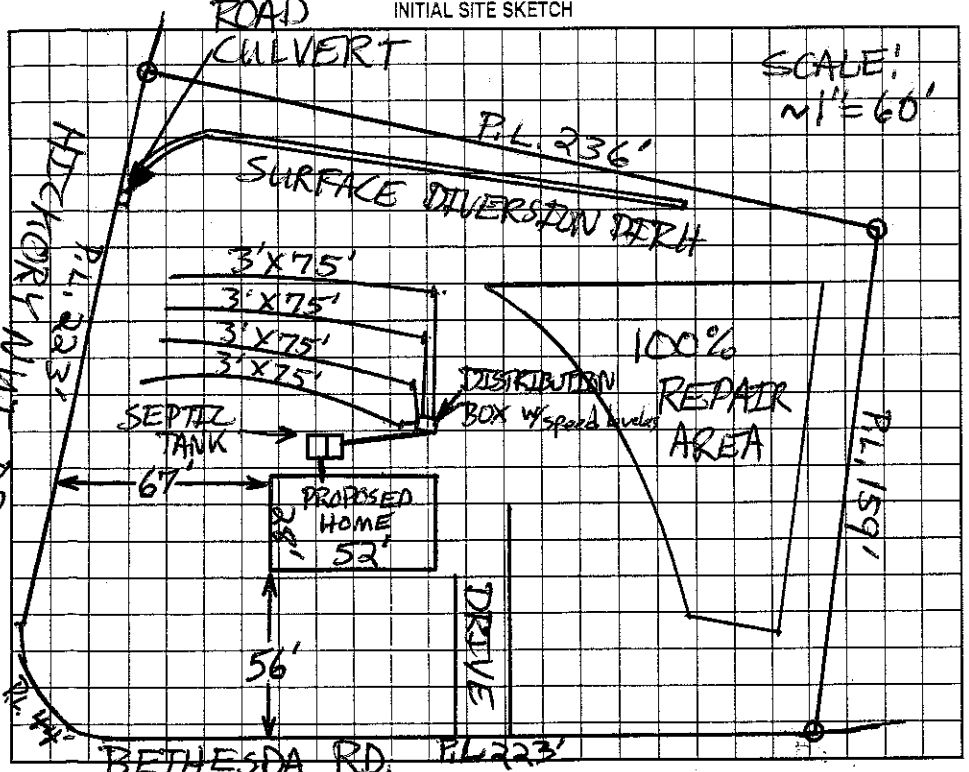
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public ☐ Community

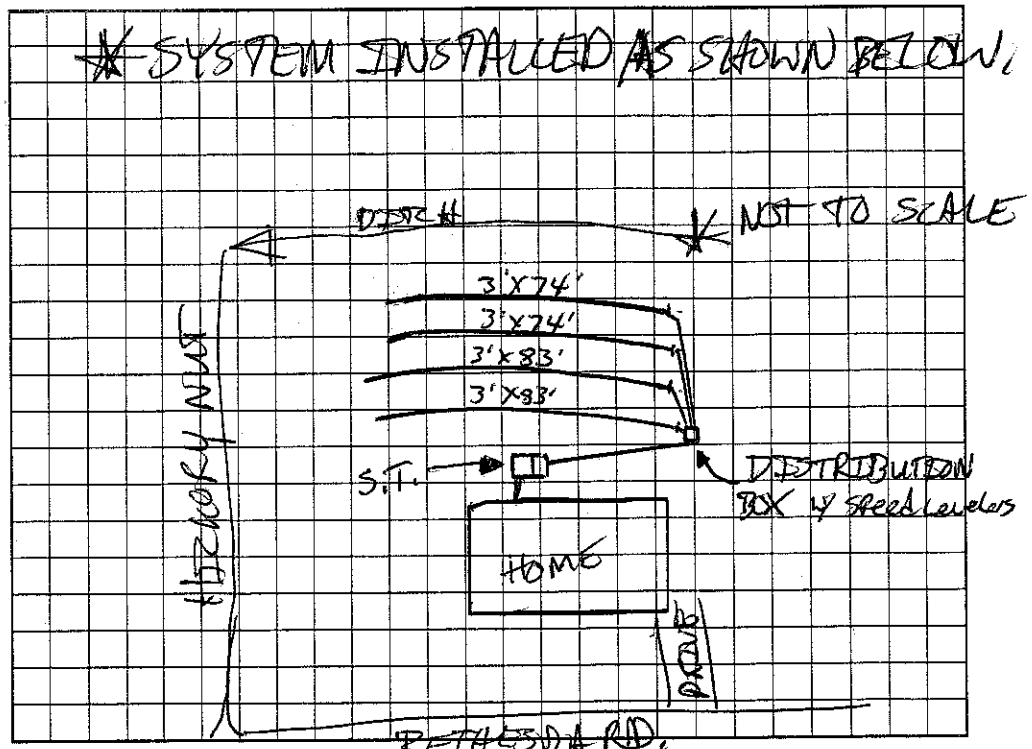
Comments/Conditions: (1) INSTALL SYSTEM USING 1 DISTRIBUTION BOX WITH SPEED LEVELERS, (2) DIVERT SURFACE WATER USING A SURFACE WATER DIVERSION DITCH TO ROAD CULVERT.

Comments/Conditions: - SEPTIC TANK INSTALLED USING 2 ABEL FILTER.

INITIAL SITE SKETCH



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: Kathleen Jenkins date 3/05/03 Installed by: BOBS BACKHOE 4-16-03

Improvement Permit by: Patrick Mitchell date 03/05/03 Operation Permit by: Patrick Mitchell date 04/17/03

Authorization to Construct by: Patrick Mitchell date 03/05/03 Existing System Inspection by: ____ date ____

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