IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 152477 PIN# 4765-67 0220

OWNER OR APPLICANT Bobby Cheek DATE 9-12-08

ADDRESS 110 Fairridge Hill Lane Statesville NC PHONE: Business 704-873-2496 Home

LOCATION 64 E to River Hill Rd also to Fraley 5th Mobile Home and Lot on Right

SUBDIVISION Ashwood PH III Part BLOCK / SECTION LOT 21/23 LOT AREA SITE CLASS: 5 DESIGN FLOW 360 L.T.A.R. Existing

Septic Tank: 1500 Gallons: ST8 Date

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No.

Nitrification Field: No Fields Square Feet 1000 Linear Feet 400

No Lines 4 Trench Width Max Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair ☐ Expansion System Type: I II III IV V VI

System Description: Ground Crawl

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod. Home No. Bedrooms 3

☐ Mobile Home No. Persons

☐ Business No. Employees

☐ Other

Water Supply: ☐ Individual ☒ Public ☐ Community

☐ Gravity ☐ Pressure ☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Comments:/Conditions:

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INITIAL SITE SKETCH

Trailer must use the shared Septic System of 122 Fraley Lane and 126 Fraley Lane. NO other trailer can be put on this shared septic

* This is the 5th trailer location on right on Fraley

* NO trailer can be put in the 6th trailer position

AS BUILT SKETCH

Fraley Road

DRIVE

New mh

Septic

This Mobile Home can be put here also as long as this Mobile Home is here!

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: date

Improvement Permit by: date

Authorization to Construct by: date

Installed by:

Operation Permit by: date 9/12/08

Existing System Inspection by: date 9-12-08

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