CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 92703 PIN# 4765 89 9976 DATE 11/3/00

OWNER OR CONTRACTOR Scotty England PHONE: Business Home 876-0999

ADDRESS 984 Turnersburg Hwy Statesville NC 28625

LOCATION 64S, L Riverhill, 2miles on Rt before #563

SUBDIVISION — BLOCK / SECTION — LOT — LOT AREA 4.54c SITE CLASS PS DESIGN FLOW 360 LTAR 0.3

Septic Tank: 1000 Gallons, STB 760 Date 10/26/00

Pump Tank: Gallons, PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4 @ 100' Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

X New System Repair System Type I II III IV V VI

System Description Gravity Conv.

Repair System Description Same

Maintenance Agreement Required Yes X No

X House/Mod Home No. Bedrooms 3

Mobile Home No. Bathrooms 2

Business No Employees

Other

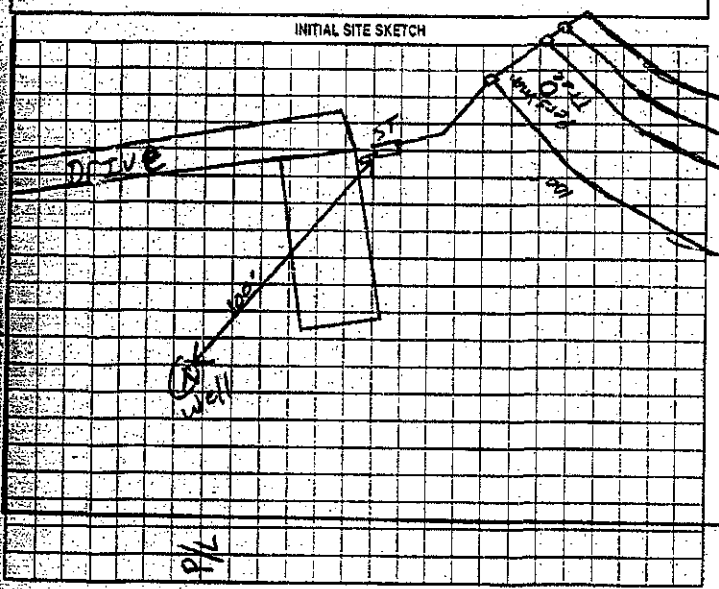
Slab X Crawl Space Basement w/plumbing Basement wo/plumbing

Water Supply: X Individual Public Community

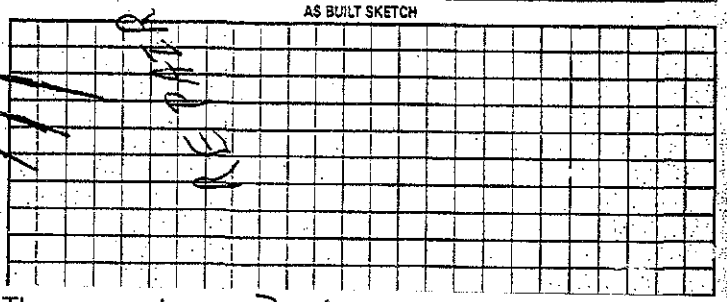
Comments/Conditions:

Comments/Conditions LABEL FILTER INSTALLED AS SHOWN

INITIAL SITE SKETCH



AS BUILT SKETCH



The proposed BARN addition does not appear to impact the existing septic system.

**NOTE:

D Hunter R.S.

Date: MAY 14, 2010

ICHD-Environmental Health Division

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: Julie England date 11/3/00 Installed by: McDANIELS R&C

Improvement Permit by: [signature] RSE date 11/3/00 Operation Permit by: [signature] RS date 9-26-01

Authorization to Construct by: [signature] RSE date 11/3/00 Existing System Inspection by: date

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

JAN. 3, 1989 5:39