CI/CI

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 104887 PIN# 4766-73-5855 DATE 03-07-02

OWNER OR CONTRACTOR D.J. CUSTOM BUILDS PHONE: Business 704-902-1459 Home

ADDRESS 192 HUNTERS HILL DR STATESVILLE NC 28677

LOCATION HWY 64 E, (R) OLD MOORESVILLE, (R) CHESTNUT (L) (R) 2ND 7SPRINGS LOOP LOT 88 ON LT

SUBDIVISION 7SPRINGS BLOCK / SECTION LOT 88 LOT AREA 1.78 SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .13

Septic Tank: 1000 Gallons: STB 1012 Date 7-22-02
Pump Tank: Gallons: PT Date
Pump Make: Model Serial No
Nitrification Field: No Fields 1 Square Feet 1200' Linear Feet 400'
No Lines 4X100' 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: CONV GRAV 25% RED
Repair System Description: GRAV 25% RED / LP PANEL
Maintenance Agreement Required: ☐ Yes X No

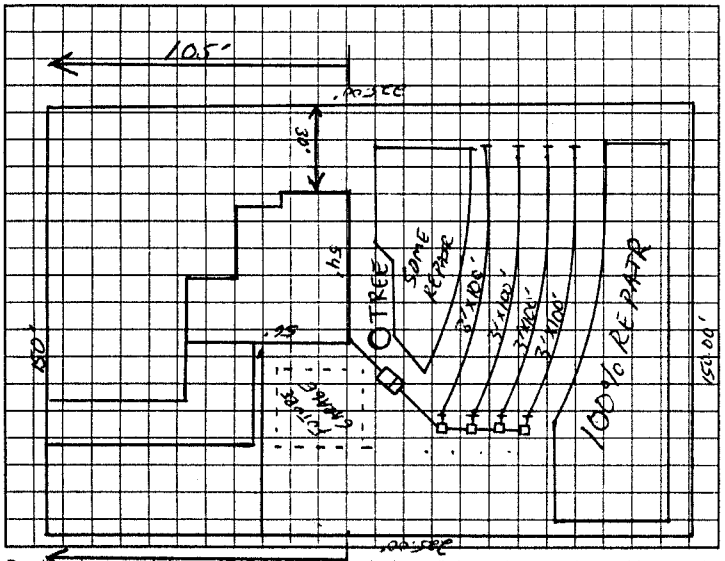
X House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab X Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual X Public ☐ Community

Comments/Conditions: (1) MAINTAIN SETBACKS (2) INSTALL LINES ON CONTOURS

Comments/Conditions: TUFF TITE FILTER & RISERS. INSTALLED AS DRAWN.

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: [signature] date

Installed by: DAVID YOUNTZ

Improvement Permit by: [signature] date 03-07-02

Operation Permit by: [signature] date 10-8-02

Authorization to Construct by: [signature] date 03-07-02

Existing System Inspection by: date

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