IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 71592 PIN# 4767164533 DATE 2-3-98

OWNER OR CONTRACTOR Jerry + Laura miller PHONE: Business _____ Home 876 2331

ADDRESS 173 Danbury Lane

LOCATION 132 Creekmore Rd 21 N to Dunlap Gate TL Creekmore 3rd lot Rt.

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.5 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. 1.3

Septic Tank: 1000 Gallons; STB 1012 Date 1-12-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: conv. Gravity
Repair System Description: Pump To Conv.
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees ____
☐ Other

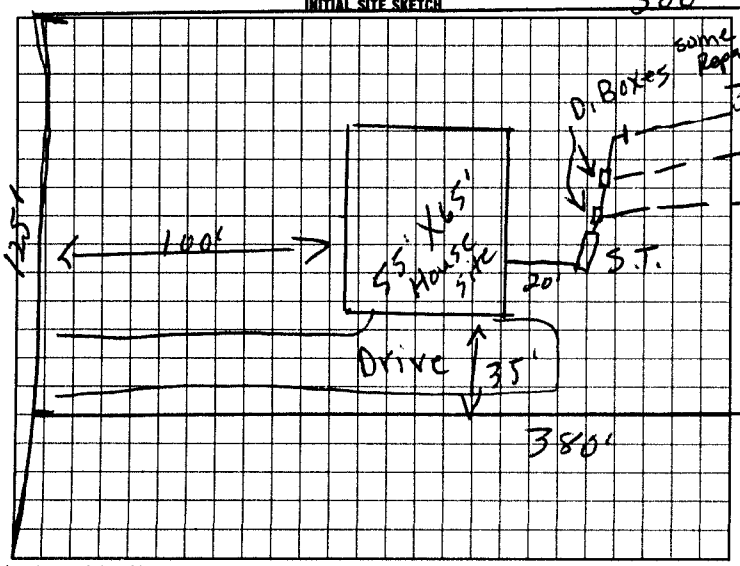
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☐ Community

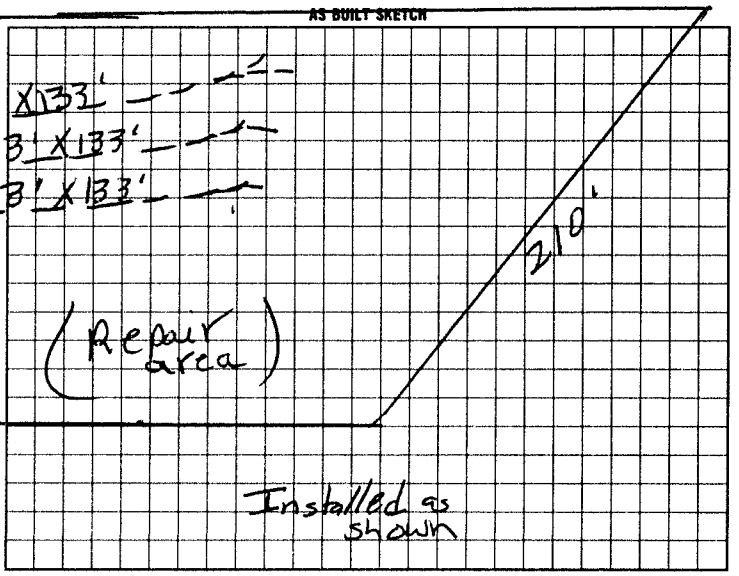
Comments:/Conditions:
Grade area over lines
To shed Surface water

Comments:/Conditions:

INITIAL SITE SKETCH



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: x Jerry C Miller Jr. date _____ Installed by: David Yount

Improvement Permit by: P. C. Moore date 2-3-98 Operation Permit by: M of C of RS date 3-25-99

Authorization to Construct by: P. C. Moore date 2-3-98 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