IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 079577 PIN# 4770071392 DATE 3/19/99

OWNER OR CONTRACTOR Nellie Roberson PHONE: Business _____ Home 704-528-3987

ADDRESS 438 Kestler Farm Rd. Mooresville NC 28115

LOCATION 115N, TR Shinnville, TL White Ridge, on left

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 1.18 SITE CLASS. Ps DESIGN FLOW 240 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB _____ Date _____
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 756 Linear Feet 252
No Lines 3@84 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☐ New System ☐ Repair System Type: I, (II), III, IV, V, VI
System Description: Existing
Repair System Description: _____
Maintenance Agreement Required: ☐ Yes ☐ No

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

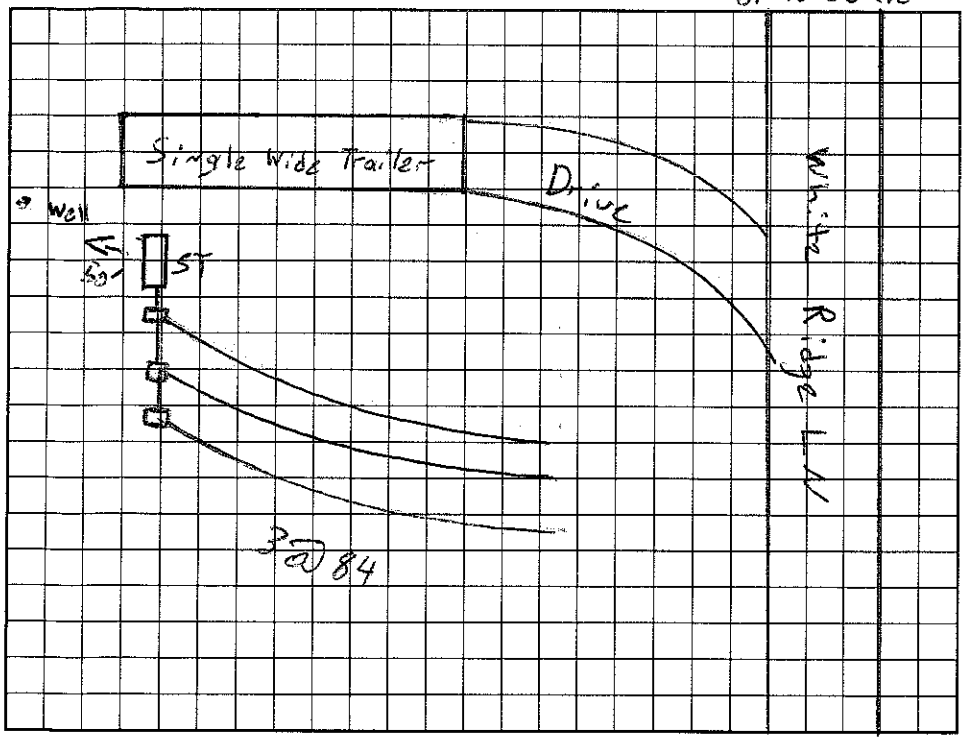
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply:
☒ Individual
☐ Public
☐ Community

Comments:/Conditions: System was functioning properly w/ no sign of failure at time of inspection. System is adequate for the addition of single wide 2 Bedroom Trailer.

Comments:/Conditions:

INITIAL SITE SKETCH Not to scale



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: Carol R. Witherspoon date 3/22/99 Installed by: _____

Improvement Permit by: Jeff Morgan date 3/19/99 Operation Permit by: Jeff Morgan date 3/19/99

Authorization to Construct by: Jeff Morgan date 3/19/99 Existing System Inspection by: Jeff Morgan date 3/19/99

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