IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 (C1) MOORESVILLE 704-664-5281

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

(J)

PERMIT# 12585 PIN# 4776-06-0199 DATE 12-30-04

OWNER OR CONTRACTOR FLEETWOOD HOMES OF STATESVILLE PHONE: Business 704-400-7019 Home 704-872-0179

ADDRESS 1270 ~~FLEETWOOD HOMES~~ NORTHSIDE DRIVE, STATESVILLE, NC 28625

LOCATION OLD MOCKSVILLE ROAD, TR CHESTNUT GROVE ROAD, TL EASTGATE DRIVE, 3RD LOT ON RIGHT BEFORE END

SUBDIVISION EASTGATE BLOCK / SECTION ____ LOT 23 LOT AREA 24,029.4 SF SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. 0.30 GPD/FT²

Septic Tank: 1000 Gallons; STB 760 Date 6-14-04
Pump Tank: ____ Gallons; PT ____ Date ____
Pump Make: ____ Model ____ Serial No. ____
Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400
No Lines FOUR Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☑ New System ☐ Repair System Type: I, II, III, IV, V, VI
System Description: CONVENTIONAL, GRAVITY
Repair System Description: 50% REDUCTION, LOW PRESSURE
Maintenance Agreement Required: ☐ Yes ☑ No ☐ Other ____
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

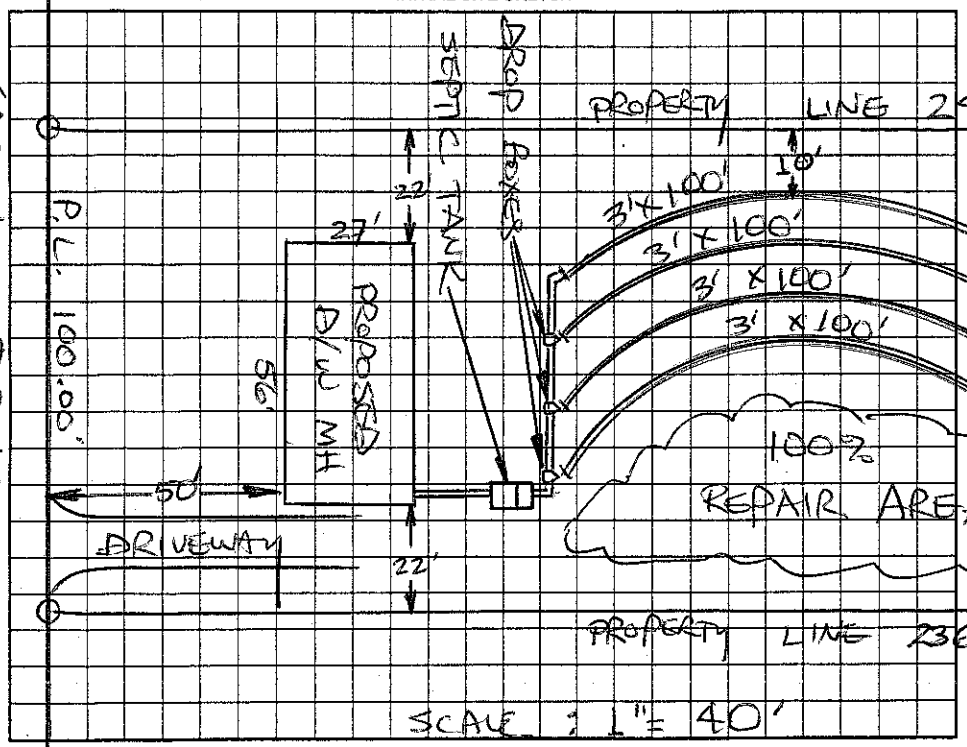
☑ House/Mod. Home No. Bedrooms 3
☑ Mobile Home No. Bathrooms ____
☐ Business No. Employees ____

Water Supply: ☐ Individual ☑ Public ☐ Community

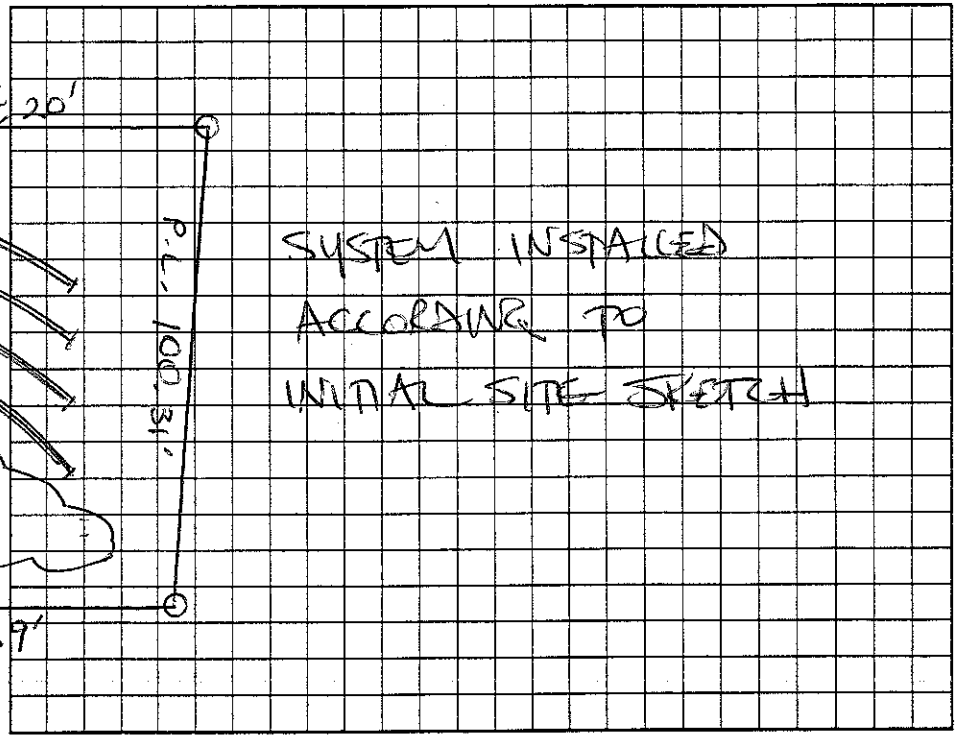
Comments:/Conditions: REMOVE EXISTING DEBRIS FROM DRAINFIELD AREA, CONTACT HEALTH DEPARTMENT TO FLAG-OUT SYSTEM AFTER CLEARING & PRIOR TO INSTALLATION

Comments:/Conditions: SEPTIC TANK WITH MARKER INSTALLED USING "RED POLYLOK" FILTER

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: Bryan ____ date 12/30/04 Installed by: TIM ABEE GRADING

Improvement Permit by: STEVE HEDRICK date 12-30-04 Operation Permit by: STEVE HEDRICK date 1-06-05

Authorization to Construct by: STEVE HEDRICK date 12-30-04 Existing System Inspection by: ____ date ____

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