300

IREDELL COUNTY HEALTH DEPARTMENT

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

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

PERMIT# 87397 PIN# 4776822188 DATE 1-14-00

OWNER OR CONTRACTOR D T D Enterprizes PHONE: Business 528 6192 Home

ADDRESS 115 Lauren Drive Statesville, N.C.

LOCATION 64E TL Swann Rd TR Poplar Leaf Rd 6th Hse on Rt.

SUBDIVISION 5th Creek Est. BLOCK / SECTION LOT 14 LOT AREA 1.66 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .33

Septic Tank: 1000 Gallons; STB 1012 Date 10/24/00
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 1080 Linear Feet 360
No Lines 4 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth

☑ New System ☐ Repair System Type: I (II) III. IV. V. VI
System Description: Conv. Gravity
Repair System Description: " "
Maintenance Agreement Required: ☐ Yes ☑ No

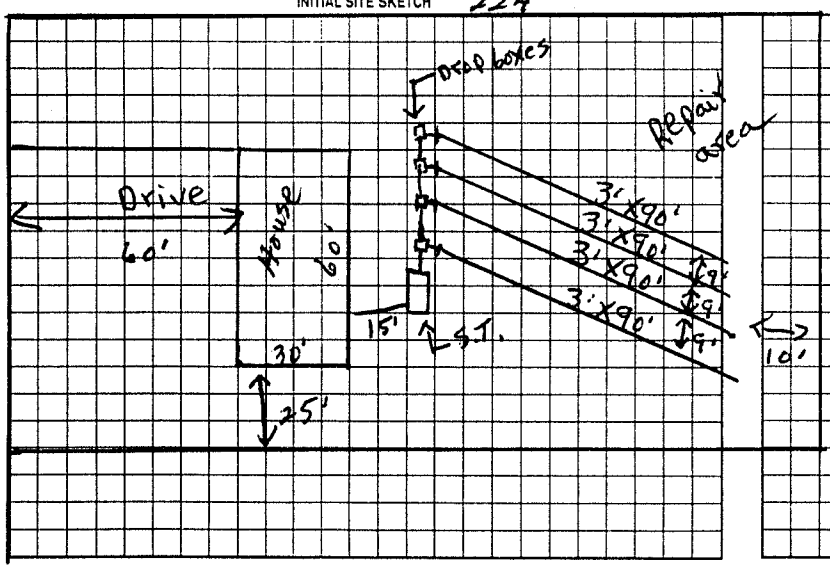
☑ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2
☐ Business No. Employees
☐ Other
☐ Slab ☑ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☑ Public ☐ Community

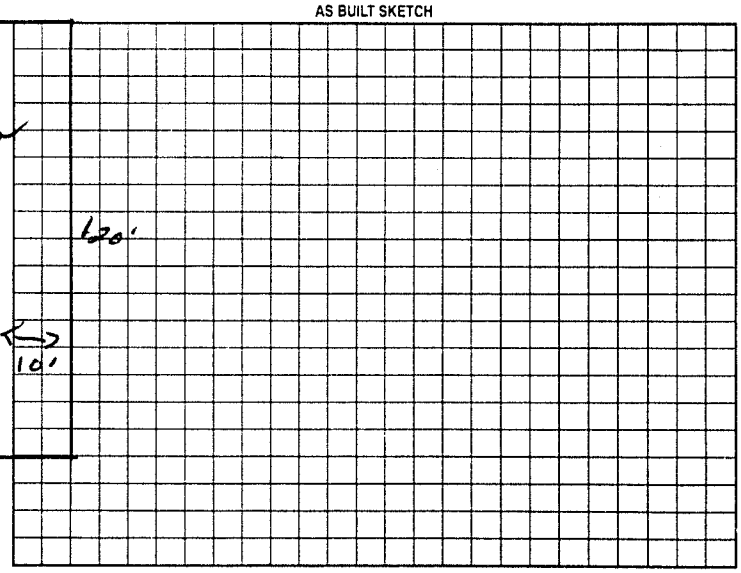
Comments:/Conditions: 116 12 127 136

Comments:/Conditions.

INITIAL SITE SKETCH 224'



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: Neal Kale date 1-25-2000 Installed by: JOMMY FRYE

Improvement Permit by: P.C. Moore date 1-14-00 Operation Permit by: C. Kelly Thomas date 11/14/00

Authorization to Construct by: P.C. Moore date 1-14-00 Existing System Inspection by: date

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